



March 6th, 2026

Chairman: Councillor D Lynch

Vice-Chairman: Mr E Jardine, Independent Member

Aldermen: O Gawith, S P Porter and J Tinsley

Councillors: J Bamford, D Bassett, S Burns, D J Craig, A P Ewing, J Gallen, S Lowry, M McKeever, R McLernon, B Magee and A Martin

Ex Officio: The Right Worshipful the Mayor, Alderman A Grehan

Deputy Mayor, Alderman H Legge

Notice Of Meeting

A meeting of the Governance and Audit Committee will be held on **Thursday, 12th March 2026** at **6:00 pm** for the transaction of the undernoted Agenda.

David Burns
Chief Executive

Agenda

1.0 APOLOGIES

2.0 DECLARATIONS OF MEMBERS' INTERESTS

- (i) conflict of interest on any matter before the meeting (Members to confirm the specific item)
- (ii) pecuniary or non-pecuniary interest (Member to complete disclosure of interest form)

📄 *Disclosure of Interests form Sept 24.pdf* Page 1

3.0 REPORT BY PERFORMANCE IMPROVEMENT OFFICER

3.1 Customer Care Feedback Q3 2025/26

For Noting

📄 *Item 3.1 cover report - Customer Care Feedback Q3 G&A.pdf* Page 3

📄 *Item 3.1 Appendix I Q3 Customer Care Dashboard.pdf* Page 5

3.2 Q3 Performance Improvement Monitoring - Objectives, Case Studies, Performance KPIs & Corporate Plan KPIs

For Noting

📄 *Item 3.2 Cover Report - Q3 Performance monitoring.pdf* Page 9

📄 *Item 3.2 Appendix I - Quarter 3 monitoring MASTER.pdf* Page 11

📄 *Item 3.2 Appendix IIa FINAL - Performance KPIs detailed.pdf* Page 18

📄 *Item 3.2 Appendix IIb FINAL - Performance KPIs summary.pdf* Page 24

📄 *Item 3.2 Appendix IIIa - Corporate Plan KPIs detailed.pdf* Page 30

📄 *Item 3.2 Appendix IIIb - Corporate Plan KPIs summary.pdf* Page 33

3.3 Draft Performance Improvement Objectives & Projects 2026/27

For Decision

📄 *Item 3.3 Cover Report - Performance Improvement Objectives & Projects 26 27.docx* Page 36

📄 *Item 3.3 Appendix 1 - Proposed Objectives and Projects 2026 27.pdf* Page 38

📄 *Item 3.3 Appendix II PI Objectives & projects Equality Screening 2026.pdf* Page 42

4.0 REPORT BY HEAD OF ENVIRONMENTAL HEALTH, RISK AND EMERGENCY PLANNING

4.1 Corporate Risk Register

For Decision

▢ *Item 4.1 cover report Corporate Risk Register Report Mar 26.pdf* Page 58

▢ *Item 4.1 Appendix I Corporate Risk Dashboard (1).pdf* Page 61

5.0 REPORT BY INTERNAL AUDIT MANAGER

5.1 Global Internal Audit Standards Gap Analysis

For Noting

▢ *Item 5.1 Cover Report - GIAS GAP Analysis.pdf* Page 62

▢ *Item 5.1 Appendix 1 - GIAS Gap Analysis.pdf* Page 63

5.2 Proposed Internal Audit Performance Indicators

For Approval

▢ *Item 5.2 Cover Report - Proposed Performance Indicators.pdf* Page 75

▢ *Item 5.2 Appendix 1 - Performance Indicators 2026.pdf* Page 76

6.0 REPORT BY HEAD OF FINANCE

6.1 Corporate Risk CRR 7 Financial Sustainability Deep Dive

For Noting

▢ *Item 6.1 Cover report - Deep Dive Financial Sustainability.pdf* Page 78

▢ *Item 6.1 Appendix 1 - Deep Dive Financial Sustainability Slides March 26.pptx* Page 81

7.0 REPORT BY HEAD OF ENVIRONMENTAL HEALTH, RISK AND EMERGENCY PLANNING

7.1 Corporate Risk CRR 011 Burial Grounds Deep Dive

For Noting

▢ *Item 7.1 Cover report final 5.3.26 - Deep Dive Cemeteries Risk GA report March 2026 final.pdf* Page 89

▢ *Item 7.1 Appendix 1 FINAL 5.3.26 - CRR 11 Burial Grounds Deep Dive.pptx* Page 92

8.0 CONFIDENTIAL BUSINESS - "IN COMMITTEE"

8.1 REPORT BY INTERNAL AUDIT MANAGER

(i) **Internal Audit Progress Report**

For Approval

Local Government Act (Northern Ireland) 2014, Schedule 6, Part 1: Exempt Information, no 3.

Confidential due to containing information relating to the financial or business affairs of any particular person (including the Council holding that information)

📄 **Item 8.1 (i) Cover Report Internal Audit Progress Report.pdf** **Not included**

📄 **Item 8.1 (i) Appendix 1 - IA Progress Report Draft for G&A Committee.pdf** **Not included**

(ii) **LCCC Draft Internal Audit Strategy 2026-2031 and Draft Internal Audit Operational Plan for 2026/27**

For Approval

Local Government Act (Northern Ireland) 2014, Schedule 6, Part 1: Exempt Information, no 3.

Confidential due to containing information relating to the financial or business affairs of any particular person (including the Council holding that information)

📄 **Item 8.1 (ii) Cover Report - Internal Audit Strategy 2026-2031 & Draft 2026-27 Operational Plan.pdf** **Not included**

📄 **Item 8.1 (ii) Appendix 1 - Draft IA Strategy 2026-2031 & Draft 2026-27 Op Plan.pdf** **Not included**

8.2 REPORT BY HEAD OF FINANCE

(i) **NIAO Audit Strategy 2025-26 - Lisburn & Castlereagh City Council**

For Noting

Local Government Act (Northern Ireland) 2014, Schedule 6, Part 1: Exempt Information, no 3.

Confidential due to containing information relating to the financial or business affairs of any particular person (including the Council holding that information)

📄 **Item 8.2 (i) Cover report for Audit Strategy - March 2026.pdf** **Not included**

📄 **Item 8.2 (i) Appendix 1 - LCCC Audit Strategy issued 05.03.26.pdf** **Not included**

9.0 ANY OTHER BUSINESS

LISBURN & CASTLEREAGH CITY COUNCIL

MEMBERS DISCLOSURE OF INTERESTS

1. Pecuniary Interests

The Northern Ireland Local Government Code of Conduct for Councillors under Section 6 requires you to declare at the relevant meeting any pecuniary interest that you may have in any matter coming before any meeting of your Council.

Pecuniary (or financial) interests are those where the decision to be taken could financially benefit or financially disadvantage either you or a member of your close family. A member of your close family is defined as at least your spouse, live-in partner, parent, child, brother, sister and the spouses of any of these. Members may wish to be more prudent by extending that list to include grandparents, uncles, aunts, nephews, nieces or even close friends.

This information will be recorded in a Statutory Register. On such matters **you must not speak or vote**. Subject to the provisions of Sections 6.5 to 6.11 of the Code, if such a matter is to be discussed by your Council, **you must withdraw from the meeting whilst that matter is being discussed**.

2. Private or Personal Non-Pecuniary Interests

In addition you must also declare any significant private or personal non-pecuniary interest in a matter arising at a Council meeting (please see also Sections 5.2 and 5.6 and 5.8 of the Code).

Significant private or personal non-pecuniary (membership) interests are those which do not financially benefit or financially disadvantage you or a member of your close family directly, but nonetheless, so significant that could be considered as being likely to influence your decision.

Subject to the provisions of Sections 6.5 to 6.11 of the Code, you must declare this interest as soon as it becomes apparent and **you must withdraw from any Council meeting (including committee or sub-committee meetings) when this matter is being discussed**.

In respect of each of these, please complete the form below as necessary.

Pecuniary Interests

Meeting (Council or Committee - please specify and name):

Date of Meeting: _____

Item(s) in which you must declare an interest (please specify item number from report):

Nature of Pecuniary Interest:

Private or Personal Non-Pecuniary Interests

Meeting (Council or Committee - please specify and name):

Date of Meeting: _____

Item(s) in which you must declare an interest (please specify item number from report):

Nature of Private or Personal Non-Pecuniary Interest:

Name:

Address:

Signed:

Date:

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*If you have any queries please contact David Burns, Chief Executive,
Lisburn & Castlereagh City Council*

Committee:	Governance & Audit Committee
Date:	12 th March 2026
Report from:	Performance Improvement Officer

Item for:	Noting
Subject:	Customer Care Feedback – Q3 2025/26

1.0 **Background and Key Issues:**

- 1.1 Council aims to provide an effective and efficient service to all its ratepayers and customers. If on occasions, the service is not as our customers would expect, the Council would like to know about it.
- 1.2 Compliments and complaints are captured on the Council's Customer Care System and Complaints are dealt with through the Council's complaints handling procedure.
- 1.3 Attached under Appendix I is a dashboard report which details the key data regarding complaints and compliments in Quarter 3 (October - December inclusive) of 2025/26.
- 1.4 Total complaints and compliments in Q3 have increased compared to the previous quarter.
- Environmental Services and Leisure & Community Wellbeing received the bulk of issues raised.
- 1.5 Within Environmental Services the main reasons for complaints were associated with waste collections. The main areas for complaints received within Leisure & Community Wellbeing were related to toilets, grounds maintenance and playparks.
- 1.6
- 1.7 Of the complaints received, approx. 8% were upheld with a further 5% upheld in part. Almost 75% were resolved informally. 6 complaints were escalated to stage 2 (Director). All stage 2 complaints that were closed during Q3 had outcomes being not upheld or partially upheld.
- There was one complaint escalated to stage 3 (NIPSO) during the quarter.
- 1.8 The response rate was zero to the Customer Satisfaction Survey in Q3.
- 1.9 A summary of key learning outcomes from complaints are as follows:
- Grave damage, to prevent this spot checks to be carried out after interments.
 - Ensure park closing times are in line with the times advertised.
 - Provide additional customer service training to staff. to ensure a consistent approach by all
 - Ensure regular cleaning and maintenance at many of our play parks.
- 1.10
- 1.11 There was no requirement to amend any policy as a result of complaints received.
- 1.12 The good practice noted from compliments related to customer service with staff going above and beyond their roles in a number of areas.
- Compliments relating to good practice was also acknowledged in relation to the running of events, specifically the Christmas Events, Weddings and the maintenance and appearance of Christmas trees and flower beds in various parts of Council area as well as customer service from our Operational Services Team.

2.0	<u>Recommendation:</u> It is recommended that Members note the report.	
3.0	<u>Finance and Resource Implications</u> N/A	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out	No – not applicable as this is an update report.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.	No – not applicable as this is an update report.

Appendices:	Appendix I – Dashboard Report showing Customer Care feedback during Q3
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CUSTOMER CARE COMPLAINTS AND COMPLIMENTS BREAKDOWN FOR QTR 3 2025

309
Total Cases

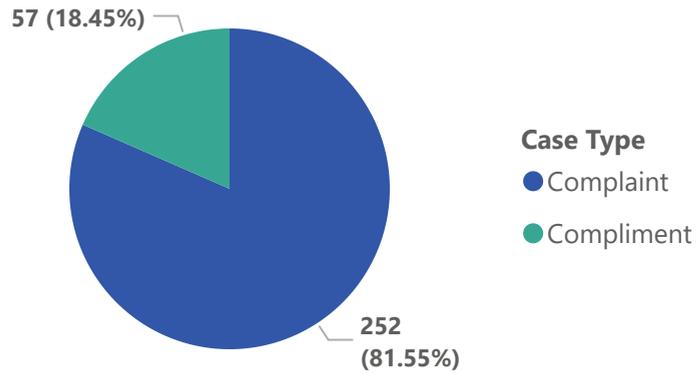
252
Total Complaints

246
Stage 1 Complaints

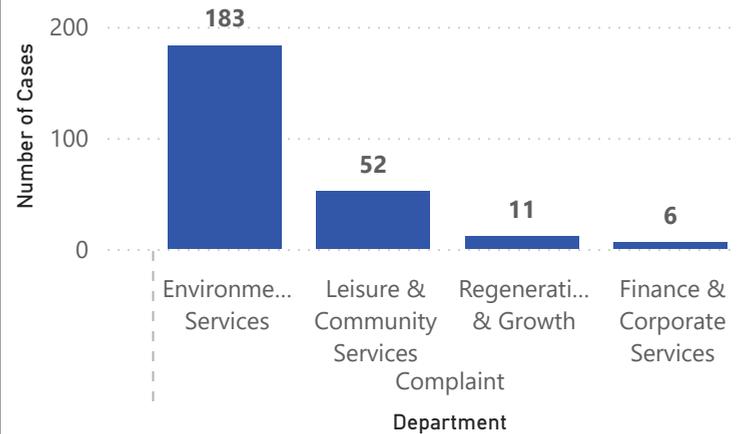
6
Stage 2 Complaints

57
Total Compliments

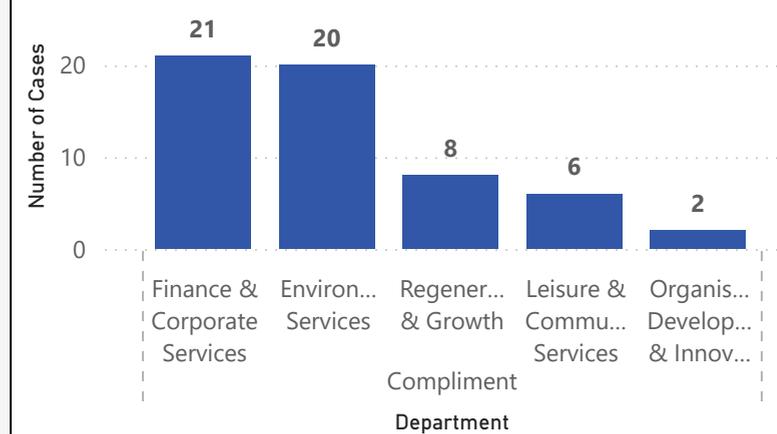
Case Type Distribution



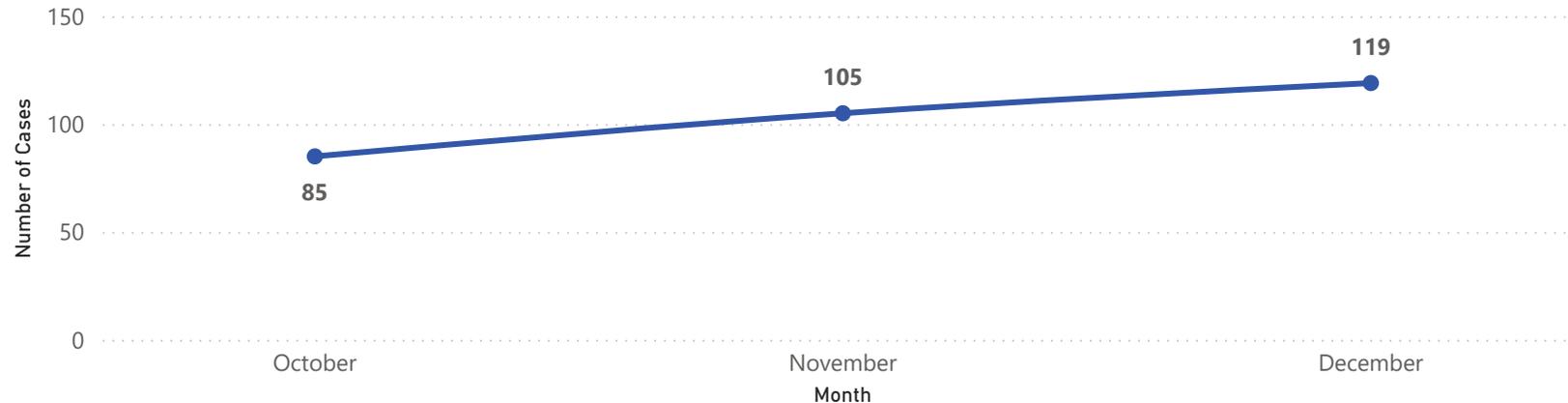
Complaint Case Types by Department



Compliment Case Types by Department



Cases Submitted Over Time



0
Extended Cases

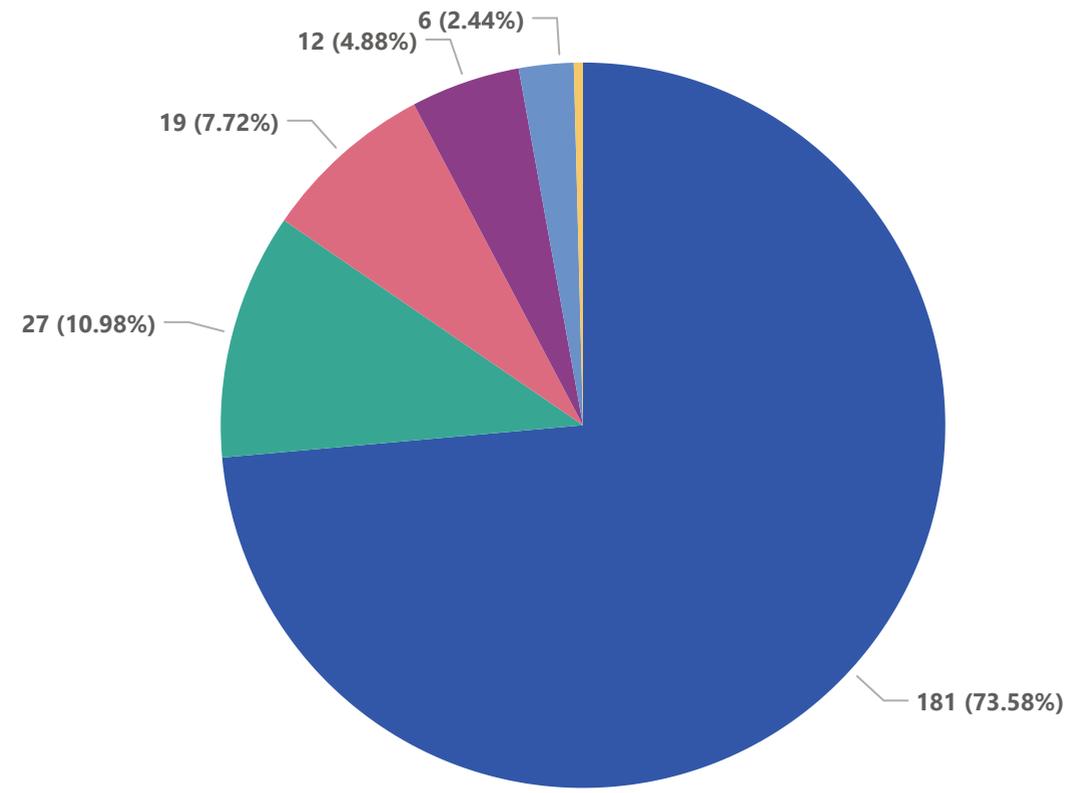
12
Late Cases

CUSTOMER CARE STAGE 1 COMPLAINT OUTCOMES FOR QTR 3 2025

246
Total Cases

Complaint Outcomes

Response Outcome ● Resolved ● Complaint not upheld ● Complaint upheld in full ● Complaint upheld in part ● Redacted Outcome ● Withdrawn



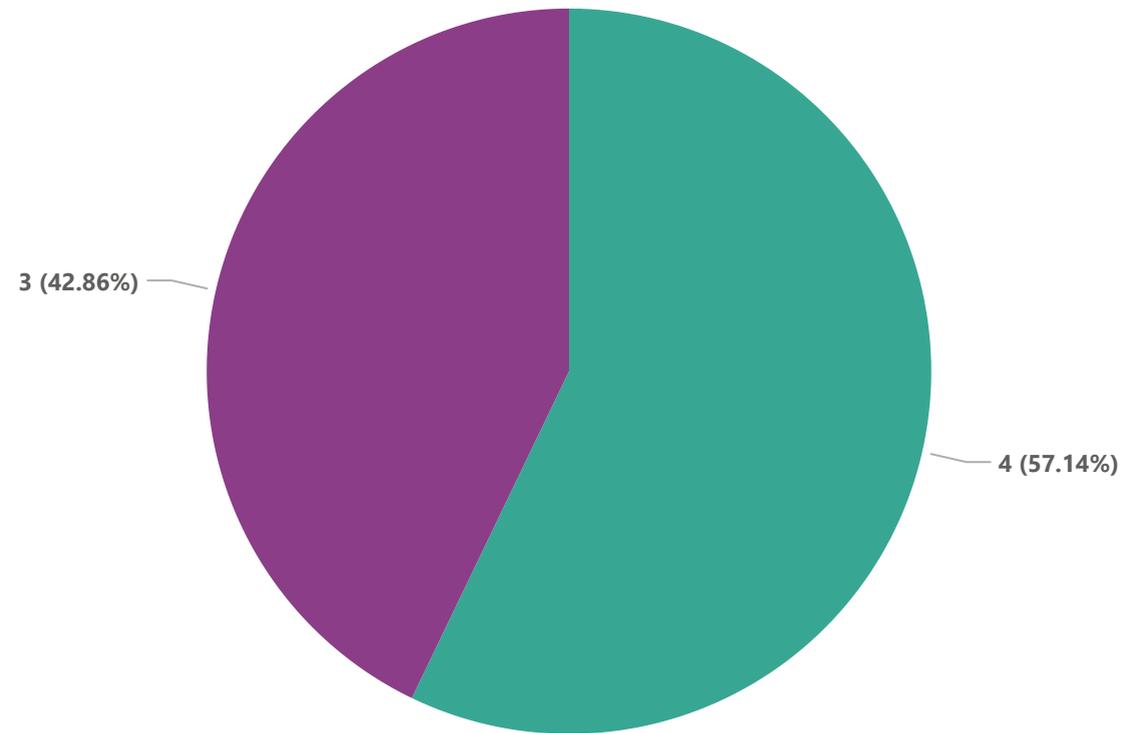
CUSTOMER CARE STAGE 2 COMPLAINT OUTCOMES FOR QTR 3 2025

7

Total Cases

Complaint Outcomes

Response Outcome ● Complaint not upheld ● Complaint upheld in part



CUSTOMER CARE STAGE 1 & 2 FULLY UPHELD COMPLAINT OUTCOMES FOR QTR 3 2025

Complaint Outcomes Upheld in Full by Classification Type

Classification Type ● Not collected ● Public Relations ● General ● Lock & Unlock ● City Centre Issues ● Customer ● Events ● External Area/Car Park ● Health & Safety



Committee:	Governance & Audit Committee
Date:	12 th March 2026
Report from:	Performance Improvement Officer

Item for:	Noting
Subject:	Q3 Performance Improvement Monitoring - Objectives, Case Studies, Performance KPIs & Corporate Plan KPIs
1.0	<u>Background and Key Issues:</u>
1.1	As part of Council's performance culture, monitoring reports on all the projects that will demonstrate improvement against the Performance Improvement Objectives as well as Performance and Corporate Plan key performance indicators (KPIs) are reported on a quarterly basis to this committee. This is to ensure accountability and transparency.
1.2	Attached under Appendix I , is a quarterly monitoring document on all the projects that will demonstrate improvement against the 2025/26 Performance Improvement Objectives, including the relevant Performance Improvement KPI. Please note the additional section within this report, which details case studies, photographs and customer feedback that have demonstrated improvement during Quarter 3. This report covers the period October – December 2025.
1.3	Attached under Appendix II is a report from the 'Performance Management System' which details the Performance Improvement Key Performance Indicators (KPIs) results for Quarter 3 . This appendix is shown in 2 formats appendix IIa and IIb.
1.4	Appendix IIa shows the quarterly progress during the 2025/26 financial year, this has been produced in response to Members' requests to see comparative data across all quarters within the financial year of reporting.
1.5	Appendix IIb shows the Q3 progress in a summary graphical format.
1.6	There are 26 Performance Indicators for the 2025/26 financial year. 18 KPIs were achieved at the end of Q3, 8 KPIs were not achieved.
1.7	Reasons for those not achieved can be found in the notes section of appendix IIa and IIb.
1.8	Attached under Appendix III is a report from the 'Performance Management System' which details the Corporate Plan Key Performance Indicators (KPIs) results for the period Quarter 3 . This appendix is shown in 2 formats appendix IIIa and IIIb.
1.9	Appendix IIIa shows the quarterly progress during the 2025/26 financial year.
1.10	Appendix IIIb shows the Q3 progress in a summary graphical format.
1.11	There are 9 Corporate Plan Indicators for the 2025/26 financial year. 8 KPIs were achieved at the end of Q3, 1 KPI was not achieved.
1.12	The 1 KPI that was not achieved, and the explanation why, can be found in the notes section of appendix IIIa and IIIb.

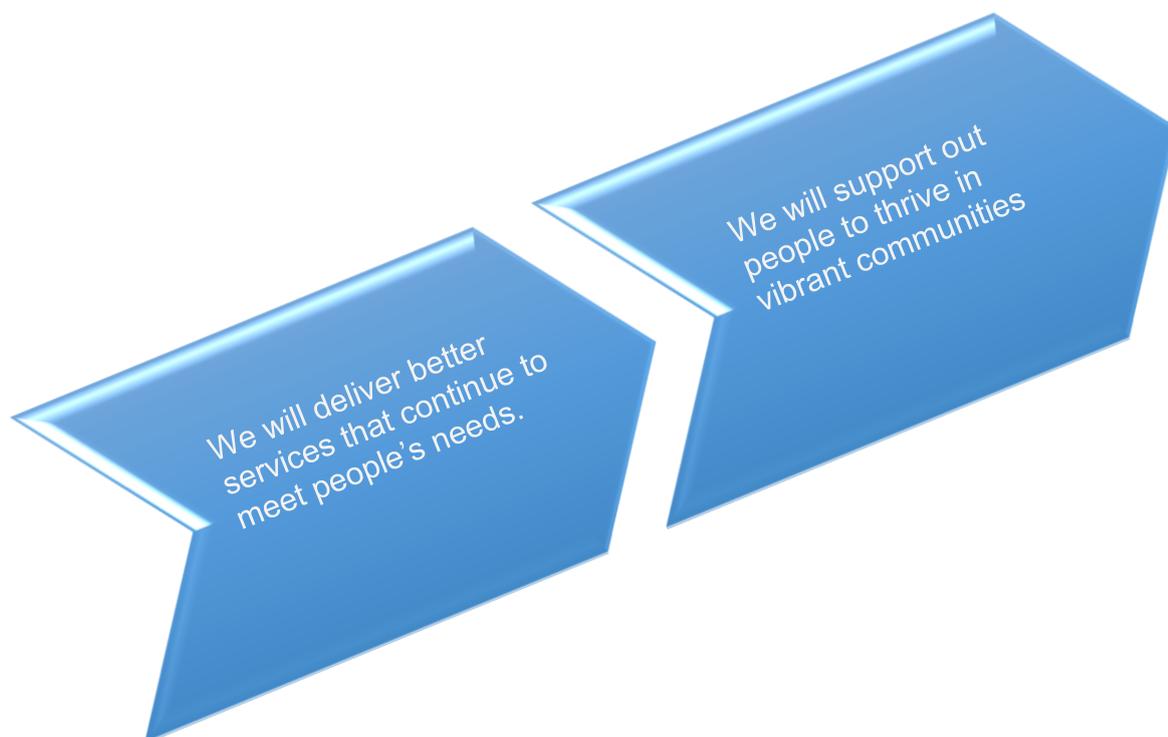
2.0	<p><u>Recommendation</u></p> <p>It is recommended that Members note the appended reports.</p>	
3.0	<p><u>Finance and Resource Implications</u></p> <p>None.</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.

<p>Appendices:</p>	<p>Appendix I - a quarterly monitoring document including case studies of improvement for the period Quarter 3 2025/26.</p> <p>Appendix IIa & IIb details the Performance KPI results for the period Quarter 3 2025/26.</p> <p>Appendix IIIa & IIIb details the Corporate Plan KPI results for the period Quarter 3 2025/26.</p>
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Performance Improvement Objectives 2025/26

Update Report Quarter 3, 2025/26



Performance Improvement Objective (1)

We will deliver better services that continue to meet people’s needs.

Project 1: Enhance processing times of planning applications by implementing and monitoring the Planning Service Improvement Programme (25/26)

Success Measures <ul style="list-style-type: none"> Proportion of invalid applications returned within 5 working days: 90% per quarter % of older applications (18+ months) Q1 – 20%, Q2 – 40%, Q3 - 70%, Q4 - 90% Processing time (Local Applications) 15 week average: Q1 – 30, Q2 – 25, Q3 -20, Q4 – 15 	Quarterly Update: PI targets varied <ul style="list-style-type: none"> 61% of older applications were reduced during Q3, this equated to a total of 31 older applications processed. There was limited opportunity to perform against this measure in December which impacted adversely on our ability to meet the target for quarter 3. The target for processing times for local applications was met during Q3 with an improvement of approximately 25.4 weeks from Q1. 6 more applications were decided than were received.
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Impact
 While the target was exceeded for older applications, this was to the detriment of the statutory target for local applications – but an improvement was made in Q3 of 22.2 weeks since Q1.
 It should also be noted however, that there was a significant reduction in the processing times for local applications which indicates the focus on this improvement project is now beginning to have a positive impact.

Project 2: Improve our Prompt Payments – reduce number of days taken to pay suppliers

Success Measures <ul style="list-style-type: none"> PI KPI: % of supplier invoices paid within 10 days Q1 65%, Q2 70%, Q3 75%, Q4 80% PI KPI: % of supplier invoices paid within 30 days Q1 88%, Q2 90%, Q3 92%, Q4 95% 	Quarterly Update: PI Targets exceeded <ul style="list-style-type: none"> 85.55% of invoices were paid within 10 working days 96.11% of invoices were paid within 30 days.
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Impact
 Although we remain under the KPI of 90% for 10 days and 100% within 30 days, there has been a concentrated effort across the Council to improve the payment times.

Project 3: Increase our staff attendance levels

Success Measures <ul style="list-style-type: none"> The average number of working days lost due to absences reduced. (Rolling year absence – days lost per employee): Q1 – 15.5, Q2 – 15.0, Q3 – 14.5, Q4 – 14 	Quarterly Update: Target exceeded <ul style="list-style-type: none"> 14.28 days 16 H&W initiatives
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Impact
 16 Health & Wellbeing Initiatives were undertaken in Q3 to support employee wellbeing.

Project 4: Reduce the percentage of household waste being disposed of in landfill sites.	
Success Measure <ul style="list-style-type: none"> A maximum of 10% collected waste will be sent to landfill 	Quarterly Update: Targets exceeded <ul style="list-style-type: none"> 0.31% of household waste has been landfilled
Impact	
A new contract came into effect on 01 February 2025	

Performance Improvement Objective (2)

We will support our people to thrive in vibrant communities

Project 1: Enabling our citizens to influence decision making through community conversations in Lisburn South and Downshire West.	
Success Measures <ul style="list-style-type: none"> Development of a Village / Placeshaping Plan in Lisburn South (Ballymacash) and Downshire West (TBC) Q2 – 1 completed, Q4 - 1 additional completed Agreement & implementation of Village plan and where applicable case studies on the difference the community conversations have made within the areas 	Quarterly Update: PI Targets on track <ul style="list-style-type: none"> Following the community consultation held in September, the Ballymacash Village Action Plan was formally presented back to the community on 9 October 2025. Community attendees accepted and endorsed the plan, confirming shared agreement on short-, medium- and long-term priorities for the area. The ratified Action Plan (Dec 2025 is latest updated version) now provides a clear, community-informed framework for delivery. Actions are being progressed collaboratively by Council services, statutory partners and local organisations, with the Community Planning Team providing coordination and oversight Early delivery activity is already underway, demonstrating momentum and responsiveness to community-identified issues. This includes environmental improvements, road safety and accessibility actions, improved local signage and mapping, and practical support initiatives linked to wellbeing, age-friendly activity and community infrastructure The Community Planning Team will continue to attend Ballymacash Regeneration Network meetings on a regular basis to provide progress updates, support delivery partners, and ensure ongoing community insight informs implementation and sequencing of actions. Decisions on the next Village Plan locality (including Moira / Downshire West) remain under consideration and will be progressed in line with capacity, learning from Ballymacash, and alignment with wider Community Planning priorities
Impact	
See case study overleaf	

Case Study

The Ballymacash Village Action Plan was formally presented to the community and partners on 9 October 2025, where it was accepted and endorsed by attendees. This session confirmed priority actions, validated the proposed delivery approach, and provided clarity on next steps for progression, coordination and monitoring. The agreed plan provides a clear framework for partner-led delivery, supported and overseen through Community Planning arrangements.

Through this process, Ballymacash continues to demonstrate how Village Planning can act as a practical platform for connecting community insight with partner delivery, strengthening shared ownership of local priorities and supporting collaborative, place-based improvement.

Together, these plans ensure that local voices shape local change, reinforcing how Council-led Village Planning continues to deliver responsive, people-centred outcomes aligned to wider Community Planning and Performance Improvement objectives.



Project 2: Improve engagement methods by developing and implementing a Citizen Consultation Framework

Success Measure
 Have we:

- Developed and launched a community consultation strategy – Q1
- Measured the number of consultations by directorate – Q3
- Created a consultation page on website, providing links to each live consultation, contact details for the service consulting etc – Q3/Q4

Quarterly Update: PI Targets on track

- Citizen Engagement Framework to be launched in Quarter 4.
- Consultation page on website, providing links to each live consultation, developed by Corporate Comms by Q4

Project 3: Deliver a range of employability programmes that will help our residents to achieve relevant qualifications that will enable them to gain new or better employment. This will also include the delivery of specialist support and advice for those with a disability

Success Measure
 Have we supported 125 people within our Council area to achieve relevant qualifications that will enable them to gain employment.

- LMP – support for 100 people
 Q1 – 0, Q2 – 20, **Q3 – 40**, Q4 – 40
- Support for 25 people with a disability
 Q1 – 0, Q2 – 5, **Q3 – 10**, Q4 – 10

Quarterly Update: Target exceeded

- 75 participants participated in the programme by end of Q3 exceeding target of 60 participants by end of this period.
- LCC LMP launched an additional 7 employability programmes.
- 8 participants undertook a Welding Academy
- 40 participants were recruited onto the Gamified Learning Programme
- Delivered 2 Job Fairs across the Council area supporting 452 participants.
- Secured additional funding to the value of £100k to support individuals leaving looked after care.

Impact
 See Case Studies overleaf

Case Studies:

The Council strives to target those furthest from the labour market who face additional barriers to employment. As part of Lisburn & Castlereagh City Council's Labour Market Partnership programme, the Council has developed a diverse range of employability programmes and events that will support our residents to achieve qualifications and gain employment. Here are some of the highlights achieved.

Welding Academy

The engineering sector across Lisburn & Castlereagh plays a vital role in the local economy, with a high demand for skilled welders. Recognising both the needs of local employers and the opportunity to support residents into sustainable employment, the Lisburn and Castlereagh Labour Market Partnership developed and delivered an innovative Welding Academy.

The programme supported eight local residents to access industry-standard training; equipping them with the practical skills and qualifications required to enter this key sector. Participants worked towards achieving the British Standard 4872 welding certification, a recognised UK standard that enhances employability and meets employer expectations.



Training was delivered by South Eastern Regional College (SERC) at its dedicated welding training facility in Dundrod, providing learners with access to professional equipment and an authentic workshop environment. This ensured participants gained hands-on experience aligned with real-world engineering roles. This academy will be repeated in February 2026.



Job Fair: 50+

The Over 50s Job Fair took place on Thursday 16 October 2025 and was delivered to support residents aged 50+ who were seeking new opportunities, including returning to employment, accessing further education and training, or engaging in rewarding volunteer roles. The event recognised the skills, experience, and value that older residents bring to the local workforce and community.

The event engaged 200 participants, providing a welcoming and inclusive space where attendees could access information, advice, and guidance tailored to their needs. Participants were able to connect directly with employers, training providers, and support organisations, increasing awareness of local opportunities and potential next steps. Overall, the Over 50s Job Fair demonstrated the impact of targeted, age-inclusive support in building confidence and opening pathways for older residents. By bringing key organisations together in one accessible setting, the event supported participants to take positive steps towards employment, learning, or volunteering.

Job Fair: Dundonald Ice Bowl

The Dundonald Job Fair was held on Thursday 27 November 2025 at Dundonald International Ice Bowl. The in-person event welcomed 252 jobseekers and featured 17 local employers from a wide range of sectors, including Royal Mail, South Eastern Health & Social Care Trust, Baloo Hire etc. Employers were provided with the opportunity to showcase current vacancies, promote their organisations, and engage directly with potential recruits in a single, accessible setting. The event supported efficient recruitment by enabling face-to-face conversations and immediate follow-up with interested candidates.



Overall, the job fair proved highly effective in creating meaningful engagement between employers and jobseekers. Employers reported strong interest in available roles, with many conducting informal interviews on the day and progressing candidates directly to next stages of recruitment. The event provided a practical and efficient platform for real-time recruitment while giving jobseekers direct access to live opportunities, reinforcing the council’s commitment to delivering outcomes-focused employment initiatives that support both business growth and local people into work.

THRIVE Programme

Pathways to Employment for Individuals with a Disability

The THRIVE Programme was launched by the Lisburn and Castlereagh Labour Market Partnership (LMP) to support 35 individuals who are economically inactive due to disability by addressing key barriers to employment. The programme delivers specialist mentoring to build confidence and develop essential employability skills, including CV writing and interview preparation, alongside access to accredited qualifications to support progression into employment or suitable work placements.

Ethan successfully completed the programme last year and went on to secure employment with Foot Anstey McKees after achieving a range of accredited qualifications. Reflecting on his experience, Ethan said: “I’ve been settling in well at Foot Anstey McKees. My work is varied and interesting, and I enjoy it greatly. I’m also working with a brilliant team. I’m very excited to continue my work going into the future.”



 To see Ethan’s story in full, showcasing the impact of the THRIVE Programme, please click [here](#).

Project 4: Support the progression of actions in the Glenavy Village Plan in partnership with new and established groups.

<p>Success Measures</p> <ul style="list-style-type: none"> Physical Measures: <ul style="list-style-type: none"> Installation of new playpark in Killultagh housing development end of Q1 Installation of new bus shelter at Lyngrove by end of Q2 Replacement of existing bins and increased capacity of bins in Glenavy area. Establishment of a pedestrian crossing in the village of Glenavy. Community & Wellbeing Measures: <ul style="list-style-type: none"> Capacity building with local community groups Environmental Measures: <ul style="list-style-type: none"> Biodiversity projects 	<p>Quarterly Update: Targets on track</p> <ul style="list-style-type: none"> A community networking and update meeting was held on Monday 8 December 2025 at St Clare’s Community Hall, Glenavy. Progress continues across physical infrastructure measures, including completion of the new playpark at Killultagh, replacement and increased capacity of litter bins, and ongoing engagement with the Department for Infrastructure in relation to the bus shelter at Lyngrove and pedestrian crossing proposals within the village. Community and wellbeing activity remains ongoing, with continued capacity-building support for local groups and a focus on improving communication, collaboration and sustainability across the voluntary and community sector in Glenavy. The December networking session builds on earlier engagement and supports the development of a more connected local network. Environmental and biodiversity actions are progressing, with successful school-based engagement, planting initiatives, and continued partnership working with Parks & Amenities, Waste Management, NIHE and other agencies to address village appearance, green spaces and maintenance issues. The updated Glenavy Village Action Plan (as of end of 2025) provides an on-going clear framework of short-, medium- and long-term actions, with lead partners identified and regular updates informing delivery, monitoring and reporting through Community Planning structures
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<p>with schools in Glenavy throughout year</p> <p>Woodland and horticulture events in Glenavy throughout year</p>	<p>Overall update:</p> <ul style="list-style-type: none"> • Completed: Playpark, bins, biodiversity/schools engagement, networking engagement • In progress: Bus shelter, pedestrian crossing, ongoing community capacity building • Dependencies: Dfl surveys, planning approvals, longer-term capital and traffic considerations
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Impact
See Case Studies

Case Studies

In December 2025, a community engagement and networking session was held at St Clare’s Community Hall, Glenavy, led by the Head of Communities and jointly facilitated by Community Services and Community Planning. The session was attended by a wide range of local community organisation representatives, reflecting the diversity of groups active within Glenavy.



The primary focus of the session was to explore how best to utilise and connect Glenavy’s dispersed community groups to support delivery of the Glenavy Village Plan. Discussion centred on identifying practical ways existing groups could contribute to actioning priorities - such as environmental improvements, community wellbeing activities and local maintenance initiatives - while also considering whether new or more formalised structures could strengthen coordination, accountability and access to funding.

The session highlighted strong community assets, including local knowledge, volunteering capacity and established relationships, alongside shared challenges around coordination, sustainability and communication between groups. Importantly, the discussion supported a shift from isolated activity towards more collaborative, place-based working, with Council acting as an enabler and connector rather than a sole delivery body.

This engagement has helped clarify how community capacity can be better leveraged to support implementation of the Village Plan, informing next steps around networking, skills development and governance options. It also reinforces the role of Village Planning as a practical mechanism for translating community insight into coordinated action, aligned with Council and partner or community/voluntary sector priorities.

Department : All

(Type = 'Performance Improvement')

Tuesday 3rd of March 2026

Planning & Capital Development

148 : Older Applications Reduce the % of older applications that are more 18 months old

Reduce the % of older applications that are more 18 months old (*based on 298 older applications as at 31st March 2025)		Jul 25	Oct 25	Jan 26	Apr 26
	Target	20%	40%	70%	90%
	Actual	28% <small>* 1</small>	50% <small>* 2</small>	61% <small>* 3</small>	—
Notes:	<ol style="list-style-type: none"> 1 During this quarter 84 older applications were processed and the target was exceeded. This however means that the statutory target for local applications could not be met as our focus remained on processing older applications. 2 Q2 - target met. 3 There was limited opportunity to perform against this measure in December which impacted adversely on our ability to meet the target for quarter 3. 				

Communities

219 : Community Conversations In Lisburn South and Downshire West

Village plan developed for Lisburn South (Ballymacash) by end of September 25		Jul 25	Oct 25	Jan 26	Apr 26
	Target	No	No	Yes	Yes
	Actual	No <small>* 1</small>	No <small>* 2</small>	Yes <small>* 3</small>	—
Notes:	<ol style="list-style-type: none"> 1 Community consultation will be held in Ballymacash on the evening of 4 September and an Action Plan produced by end September 2 Community consultation was held in Ballymacash on the evening of 3rd September and a draft Action Plan has been produced. A refined version of the Ballymacash Village Action Plan will be presented back to community representatives and partners on 9 October 2025 for review, agreement, and forward progression. 3 The Ballymacash Village Action Plan was presented back to community representatives and partners on 9 October 2025. The plan was endorsed by attendees and is now being progressed, with delivery actions led by partners and supported through ongoing Community Planning engagement and monitoring. 				
Village plan developed for Downshire West by end March 26		Jul 25	Oct 25	Jan 26	Apr 26
	Target	No	No	No	Yes
	Actual	No <small>* 1</small>	No <small>* 2</small>	No <small>* 3</small>	—
Notes:	<ol style="list-style-type: none"> 1 Waiting for confirmation that Moira will be the location for the new Village Plan. 2 Discussions are still on-going in regards to specific location of the next Village Plan 3 The location of the next Village Plan has not yet been confirmed. Further internal scoping discussions are underway to inform a decision. 				

Innovation

225 : Engagement Methods Implementation of framework

Development of citizen consultation framework		Jul 25	Oct 25	Jan 26	Apr 26
	Target	Yes	Yes	Yes	Yes
	Actual	Yes <small>* 1</small>	Yes <small>* 2</small>	Yes <small>* 3</small>	—
Notes:	<ol style="list-style-type: none"> 1 In development and brought to CMT in Q2. 2 Citizen Engagement Framework presented to CMT and agreed as an internal document. 3 The Framework has been agreed and is being presented to CMT week beginning 12th January, this will then be taken to committee in February. Once approved at Committee and ratified it will immediately be available and promoted for use across council. 				

Launch of citizen consultation framework	Target	Jul 25 No	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	No	No * 1	No * 2	—
Notes:	<p>1 Citizen Engagement Framework has been presented to CMT and approved in principle, to be shared with Departments and launched on website at end of Q3.</p> <p>2 Framework has been agreed and is being presented to CMT week beginning 12th January, this will then be taken to committee in February. Once approved at Committee and ratified it will immediately be available and promoted for use across council and will be launched on website in Quarter 4.</p>				
Measure the number of consultations by Directorate	Target	Jul 25 No	Oct 25 No	Jan 26 Yes	Apr 26 Yes
	Actual	No	No	No * 1	—
Notes:	<p>1 The framework is a guidance document being developed for all officers. The measurement of the number of consultations will be developed when the framework is launched in Q4.</p>				
Create a consultation page on website	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No	No	No	—

Economic Development

226 : Labour Market Partnership programme Participants

Number of participants in the Labour Market Partnership programme (cumulative)	Target	Jul 25 0	Oct 25 20	Jan 26 60	Apr 26 100
	Actual	0 * 1	55 * 2	75 * 3	—
Notes:	<p>1 During Quarter 1 the Lisburn and Castlereagh Labour Market Partnership launched their first programme to be delivered as part of the 25/26 Action Plan. 12 participants completed the Classroom Assistant Academy. During this period, time has been spent on developing programmes and associated tender documentation with the aim to launch in September 2025.</p> <p>2 During Quarter 2 the Lisburn and Castlereagh Labour Market Partnership launched a range of programmes as part of the 25/26 Action Plan. The remainder of the programmes outlined in the 25/26 Action Plan will be launched during Quarter 3.</p> <p>3 During Quarter 3 the Lisburn and Castlereagh Labour Market Partnership launched a range of programmes as part of the 25/26 Action Plan. The remainder of the programmes outlined in the 25/26 Action Plan will be launched during Quarter 4.</p>				

Planning & Capital Development

234 : Local Applications (Internal KPI) Average processing time for local planning applications. (Processed from date valid to decision issued or withdrawn within an average of 22.5 weeks)

Reduce the average processing times to 22.5 weeks by year end. (assuming a starting point of 42.5 weeks)	Target	Jul 25 39	Oct 25 30	Jan 26 25	Apr 26 20
	Actual	47.8 * 1	25.6 * 2	22.4	—
Notes:	<p>1 There has been a continued focus on the processing of older applications which is still reflected in the processing times reported in this quarter. It should be noted however that 78 more applications were decided in this period than were received, given that significant numbers of older applications are being processed it is expected to achieve better performance closer to the statutory target for this indicator by the end of the year.</p> <p>2 It is expected to achieve better performance closer to the statutory target for this indicator by the end of the year but it is unlikely to meet the average processing times of 22.5 weeks for the year.</p>				

235 : Planning Service Improvement Programme Monitoring the implementation of the Planning Service Improvement Programme during 25/26

Implementation of the validation checklist	<table border="1"> <tr><td>Target</td><td>Jul 25</td><td>Oct 25</td><td>Jan 26</td><td>Apr 26</td></tr> <tr><td></td><td>No</td><td>Yes</td><td>Yes</td><td>Yes</td></tr> <tr><td>Actual</td><td>No</td><td>No</td><td>No</td><td>—</td></tr> <tr><td></td><td></td><td>* 1</td><td>* 2</td><td></td></tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		No	Yes	Yes	Yes	Actual	No	No	No	—			* 1	* 2		
Target	Jul 25	Oct 25	Jan 26	Apr 26																		
	No	Yes	Yes	Yes																		
Actual	No	No	No	—																		
		* 1	* 2																			
Notes:	<p>1 Stakeholder engagement has been concluded. Formal Public consultation process is now taking place for 12 weeks and we cannot proceed until the outcome of that process is known.</p> <p>2 Stakeholder engagement has been concluded. Formal Public consultation process is ongoing and due to close on 23 February 2026. Cannot proceed until the outcome of that process is known.</p>																					
Proportion of invalid applications returned within 5 working days Q3 75% Q4 90%	<table border="1"> <tr><td>Target</td><td>Jul 25</td><td>Oct 25</td><td>Jan 26</td><td>Apr 26</td></tr> <tr><td></td><td>0%</td><td>0%</td><td>75%</td><td>90%</td></tr> <tr><td>Actual</td><td>0%</td><td>0%</td><td>Cannot be measured*</td><td>—</td></tr> <tr><td></td><td></td><td></td><td>* 1</td><td></td></tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		0%	0%	75%	90%	Actual	0%	0%	Cannot be measured*	—				* 1		
Target	Jul 25	Oct 25	Jan 26	Apr 26																		
	0%	0%	75%	90%																		
Actual	0%	0%	Cannot be measured*	—																		
			* 1																			
Notes:	<p>1 Cannot be measured - linked to above implementation of the validation checklist.</p>																					

Economic Development

254 : Inclusivity Delivery of specialist employability support and advice for those with a disability.

Number of people supported (cumulative)	<table border="1"> <tr><td>Target</td><td>Jul 25</td><td>Oct 25</td><td>Jan 26</td><td>Apr 26</td></tr> <tr><td></td><td>0</td><td>5</td><td>15</td><td>25</td></tr> <tr><td>Actual</td><td>0</td><td>23</td><td>23</td><td>—</td></tr> <tr><td></td><td>* 1</td><td>* 2</td><td>* 3</td><td></td></tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		0	5	15	25	Actual	0	23	23	—		* 1	* 2	* 3		
Target	Jul 25	Oct 25	Jan 26	Apr 26																		
	0	5	15	25																		
Actual	0	23	23	—																		
	* 1	* 2	* 3																			
Notes:	<p>1 The Lisburn Castlereagh LMP delivered an employability event specifically targeting individuals with a disability or long-term health condition. The event focused on the provision of specialist advice and support regarding services available across the Council area. In addition to the DisAbility Employability event delivered by the Lisburn and Castlereagh Labour Market Partnership on 26th June 2025, we will also deliver a specialist employment programme for those with a disability that will provide qualifications, mentoring and employment support for 25 residents. This programme will go to tender in July with a planned launch to commence in September 2025.</p> <p>2 The Lisburn Castlereagh LMP delivered an employability event specifically targeting employers of individuals with a disability or long-term health condition. The event focused on the provision of specialist advice and support for those considering providing employment opportunities for individuals with a disability. In addition to the Be Inclusive event delivered by the Lisburn and Castlereagh Labour Market Partnership, we will also deliver two specialist employment programme for those with a disability that will provide qualifications, mentoring and employment support for 45 residents. These programmes will be launched in Quarter 3.</p> <p>3 In Q2 we supported 23 in total, therefore, this overachievement covers the Q3 target. This figure also doesn't include the 2 disability focused programmes (Thrive and Graduate) which aim to support an additional 45 participants. The recruitment hasn't been completed for these programmes so while it shows as a 0 in Q3 by Q4 we will have recruited in full. Overall it is anticipated that our annual return will have supported 78 in total which exceeds the annual KPI target of 25.</p>																					
Recruitment onto specialist programme of support	<table border="1"> <tr><td>Target</td><td>Jul 25</td><td>Oct 25</td><td>Jan 26</td><td>Apr 26</td></tr> <tr><td></td><td>No</td><td>Yes</td><td>Yes</td><td>Yes</td></tr> <tr><td>Actual</td><td>No</td><td>No</td><td>No</td><td>—</td></tr> <tr><td></td><td></td><td>* 1</td><td>* 2</td><td></td></tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		No	Yes	Yes	Yes	Actual	No	No	No	—			* 1	* 2		
Target	Jul 25	Oct 25	Jan 26	Apr 26																		
	No	Yes	Yes	Yes																		
Actual	No	No	No	—																		
		* 1	* 2																			
Notes:	<p>1 In addition to the Be Inclusive event delivered by the Lisburn and Castlereagh Labour Market Partnership, we will also deliver two specialist employment programme for those with a disability that will provide qualifications, mentoring and employment support for 45 residents. These programmes will be launched in Quarter 3.</p> <p>2 Recruitment onto the programme has commenced but will not be officially verified until Q4</p>																					
Delivery of accredited training	<table border="1"> <tr><td>Target</td><td>Jul 25</td><td>Oct 25</td><td>Jan 26</td><td>Apr 26</td></tr> <tr><td></td><td>No</td><td>No</td><td>Yes</td><td>Yes</td></tr> <tr><td>Actual</td><td>No</td><td>No</td><td>No</td><td>—</td></tr> <tr><td></td><td></td><td></td><td>* 1</td><td></td></tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		No	No	Yes	Yes	Actual	No	No	No	—				* 1		
Target	Jul 25	Oct 25	Jan 26	Apr 26																		
	No	No	Yes	Yes																		
Actual	No	No	No	—																		
			* 1																			
Notes:	<p>1 Training will commence once recruitment onto the programme has been completed.</p>																					

Receive bespoke mentoring tailored to each individual action plan	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No	No	No	—
Supporting participants on their journey Employment / Further Education	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No	No	No	—
HR&OD					
258 : Staff Absenteeism					
Average Rolling year absence	Target	Jul 25 15.5	Oct 25 15.0	Jan 26 14.5	Apr 26 14
	Actual	14.23	14.76	14.28	—
Communities					
259 : Glenavy Village Plan Actions					
Installation of new playpark in Killultagh housing development by end of Q1	Target	Jul 25 Yes	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	Yes * 1	Yes * 2	Yes * 3	—
Notes:	<ul style="list-style-type: none"> 1 Completed by Parks Dept in April and funded through the Small Settlements Fund. 2 The Parks Department completed the installation of the new playpark. It was funded through the Small Settlements Fund and is now fully operational. 3 The Parks Department completed the installation of the new playpark. It was funded through the Small Settlements Fund and is now fully operational. 				
Installation of new bus shelter at Lyngrove by end of Q2	Target	Jul 25 No	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	No * 1	No * 2	No * 3	—
Notes:	<ul style="list-style-type: none"> 1 Regeneration & Growth Committee approved this in June and written consent has been given to DfI, on behalf of Translink to adopt the four square metres of land, who are applying for planning permission. 2 A planning application has been submitted to LCCC Planning for the shelter. Awaiting planning decision. 3 This was installed in January. A further update will be provided in the Q4 report. 				
Replacement of existing bins and increased capacity of bins in Glenavy area.	Target	Jul 25 Yes	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	Yes * 1	Yes * 2	Yes	—
Notes:	<ul style="list-style-type: none"> 1 Completed by Waste Management 2 Waste Management has completed this action. New bins have been installed in key locations across the Glenavy area, with enhanced capacity now in operation. 				
Establishment of a pedestrian crossing in the village of Glenavy.	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No * 1	No * 2	No * 3	—

<p>Notes:</p>	<ol style="list-style-type: none"> 1 Economic Development taking forward , and will follow up with Dfl in terms of the process. Further update to follow. 2 The Department for Infrastructure (Dfl) has responded to the request for a pedestrian crossing on Glenavy Road, confirming that while a survey was conducted in November 2023, the location did not rank highly against other sites based on assessed need. Dfl uses a consistent, criteria-based process that considers pedestrian and vehicle volumes, traffic speed, road width, proximity to amenities, vulnerability of users, and collision history. Although the Glenavy Road site does not meet current thresholds for funding, it will remain on the Dfl list for future consideration should priorities or conditions change. 3 The Department for Infrastructure (Dfl) has responded to the request for a pedestrian crossing on Glenavy Road, confirming that while a survey was conducted in November 2023, the location did not rank highly against other sites based on assessed need. Dfl uses a consistent, criteria-based process that considers pedestrian and vehicle volumes, traffic speed, road width, proximity to amenities, vulnerability of users, and collision history. Although the Glenavy Road site does not meet current thresholds for funding, it will remain on the Dfl list for future consideration should priorities or conditions change.
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<p>Capacity building with local community groups (cumulative)</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Actual</td> <td>1</td> <td>2</td> <td>3</td> <td>—</td> </tr> <tr> <td></td> <td>* 1</td> <td>* 2</td> <td>* 3</td> <td></td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		1	2	3	4	Actual	1	2	3	—		* 1	* 2	* 3	
Target	Jul 25	Oct 25	Jan 26	Apr 26																	
	1	2	3	4																	
Actual	1	2	3	—																	
	* 1	* 2	* 3																		

<p>Notes:</p>	<ol style="list-style-type: none"> 1 A networking event was held at St Clare’s Community Hall in Glenavy with local community organisations to identify needs on 29 Jan 2025. Following this, accredited food hygiene and CPR training has been delivered. Further engagement through a subsequent networking event is planned for Sep 2025. 2 A second networking session is scheduled for November 2025. Community Planning will also attend the November 2025 Community Services Connection event to share updates on completed or unfeasible actions in the Glenavy Village Plan. 3 A community networking and update event was held at St Clare’s Community Hall, Glenavy, in December 2025, bringing together local community organisations to identify needs, share progress and support delivery of the Glenavy Village Plan. This session built on earlier engagement and strengthened coordination between local groups, Community Services and Community Planning. The December 2025 session provided an opportunity to present the latest position on the Glenavy Village Plan, confirm completed and in-progress actions, gather further community feedback, and reinforce shared priorities across physical, community and environmental themes. Community Planning will continue to engage with local networks and attend relevant Community Services connection events to share updates on progress, including actions that are completed, ongoing or no longer feasible, ensuring transparency and continued community involvement in delivery.
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<p>Biodiversity projects with schools / woodland & horticulture events in Glenavy throughout year (cumulative)</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Actual</td> <td>1</td> <td>2</td> <td>3</td> <td>—</td> </tr> <tr> <td></td> <td>* 1</td> <td>* 2</td> <td>* 3</td> <td></td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		1	2	3	4	Actual	1	2	3	—		* 1	* 2	* 3	
Target	Jul 25	Oct 25	Jan 26	Apr 26																	
	1	2	3	4																	
Actual	1	2	3	—																	
	* 1	* 2	* 3																		

<p>Notes:</p>	<ol style="list-style-type: none"> 1 Ballymacrickett Primary School has a lovely woodland area and the Community Engagement Officer in Parks Dept worked with a group of pupils in autumn 2024 doing tree identification and seed collection. She returned to the school in Dec bringing a range of bulbs and worked with the eco counsellors and children from the afterschool club to plant the bulbs in flower beds surrounding the school. The primary school has great outdoor facilities with a mini forest, raised beds for vegetables and they are in the process of building an outdoor classroom. 2 Ballymacrickett Primary School has actively participated in this work. This action is complete. 3 A bulb planting session with completed with Ballymacrickett PS on Wednesday 10th December. Approximately 60 children participated in the planting and really enjoyed the activity.
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Operational Services

263 : Waste collection % of collected waste going to landfill through the residual waste treatment contract

<p>Less than 10% of our collected waste will go to landfill</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>10%</td> <td>10%</td> <td>10%</td> <td>10%</td> </tr> <tr> <td>Actual</td> <td>0%</td> <td>0.24%</td> <td>0.31%</td> <td>—</td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		10%	10%	10%	10%	Actual	0%	0.24%	0.31%	—
Target	Jul 25	Oct 25	Jan 26	Apr 26												
	10%	10%	10%	10%												
Actual	0%	0.24%	0.31%	—												

Finance

268 : Finance Prompt payments

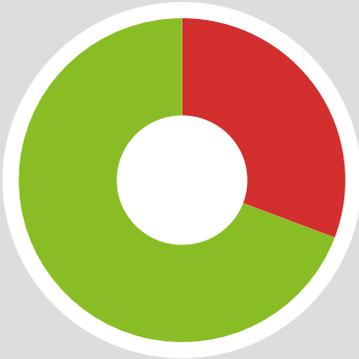
% of supplier invoices paid within 10 days	Target	Jul 25 65%	Oct 25 70%	Jan 26 75%	Apr 26 80%
	Actual	85.2%	82.62%	85.55%	—
% of supplier invoices paid within 30 days	Target	Jul 25 88%	Oct 25 90%	Jan 26 92%	Apr 26 95%
	Actual	96.81%	96.44%	96.11%	—

Performance Summary

All

(Type = 'Performance Improvement')

Tuesday 3rd of March 2026



Red = Target missed or Measure overdue
 Amber = Measure fallen slightly short/behind
 Green = Target met or exceeded
 Grey = Measure not yet due

Operational Services	1 Green
Finance	2 Green
Planning & Capital Development	3 Red
Economic Development	2 Red
Communities	1 (R)
HR&OD	7 Green
Innovation	4 Green
	1 (G)
	2 Green

PLANNING & CAPITAL DEVELOPMENT

DUE 1ST JAN 26

148 : Older Applications Reduce the % of older applications that are more 18 months old: **Reduce the % of older applications that are more 18 months old (*based on 298 older applications as at 31st March 2025)**

TARGET
70%

ACTUAL
61%

STATUS
Red

Notes: There was limited opportunity to perform against this measure in December which impacted adversely on our ability to meet the target for quarter 3.

COMMUNITIES

DUE 1ST JAN 26

219 : Community Conversations In Lisburn South and Downshire West : **Village plan developed for Lisburn South (Ballymacash) by end of September 25**

TARGET
Yes

ACTUAL
Yes

STATUS
Green

Notes: The Ballymacash Village Action Plan was presented back to community representatives and partners on 9 October 2025. The plan was endorsed by attendees and is now being progressed, with delivery actions led by partners and supported through ongoing Community Planning engagement and monitoring.

COMMUNITIES

DUE 1ST JAN 26

219 : Community Conversations In Lisburn South and Downshire West : **Village plan developed for Downshire West by end March 26**

TARGET
No

ACTUAL
No

STATUS
Green

Notes: The location of the next Village Plan has not yet been confirmed. Further internal scoping discussions are underway to inform a decision.

INNOVATION

DUE 1ST JAN 26

225 : Engagement Methods Implementation of framework: **Development of citizen consultation framework**

TARGET
Yes

ACTUAL
Yes

STATUS
Green

Notes: The Framework has been agreed and is being presented to CMT week beginning 12th January, this will then be taken to committee in February. Once approved at Committee and ratified it will immediately be available and promoted for use across council.

INNOVATION

DUE 1ST JAN 26

225 : Engagement Methods Implementation of framework: **Launch of citizen consultation framework**

TARGET
Yes

ACTUAL
No

STATUS
Red

Notes: Framework has been agreed and is being presented to CMT week beginning 12th January, this will then be taken to committee in February. Once approved at Committee and ratified it will immediately be available and promoted for use across council and will be launched on website in Quarter 4.

INNOVATION			DUE 1ST JAN 26
225 : Engagement Methods Implementation of framework: Measure the number of consultations by Directorate	TARGET Yes	ACTUAL No	STATUS Red
<p>Notes: The framework is a guidance document being developed for all officers. The measurement of the number of consultations will be developed when the framework is launched in Q4.</p>			

INNOVATION			DUE 1ST JAN 26
225 : Engagement Methods Implementation of framework: Create a consultation page on website	TARGET No	ACTUAL No	STATUS Green
<p>Notes:</p>			

ECONOMIC DEVELOPMENT			DUE 1ST JAN 26
226 : Labour Market Partnership programme Participants: Number of participants in the Labour Market Partnership programme (cumulative)	TARGET 60	ACTUAL 75	STATUS Green
<p>Notes: During Quarter 3 the Lisburn and Castlereagh Labour Market Partnership launched a range of programmes as part of the 25/26 Action Plan. The remainder of the programmes outlined in the 25/26 Action Plan will be launched during Quarter 4.</p>			

PLANNING & CAPITAL DEVELOPMENT			DUE 1ST JAN 26
234 : Local Applications (Internal KPI) Average processing time for local planning applications. (Processed from date valid to decision issued or withdrawn within an average of 22.5 weeks): Reduce the average processing times to 22.5 weeks by year end. (assuming a starting point of 42.5 weeks)	TARGET 25	ACTUAL 22.4	STATUS Green
<p>Notes:</p>			

PLANNING & CAPITAL DEVELOPMENT			DUE 1ST JAN 26
235 : Planning Service Improvement Programme Monitoring the implementation of the Planning Service Improvement Programme during 25/26: Implementation of the validation checklist	TARGET Yes	ACTUAL No	STATUS Red
<p>Notes: Stakeholder engagement has been concluded. Formal Public consultation process is ongoing and due to close on 23 February 2026. Cannot proceed until the outcome of that process is known.</p>			

PLANNING & CAPITAL DEVELOPMENT			DUE 1ST JAN 26
235 : Planning Service Improvement Programme Monitoring the implementation of the Planning Service Improvement Programme during 25/26: Proportion of invalid applications returned within 5 working days Q3 75% Q4 90%	TARGET 75%	ACTUAL Cannot be measured%	STATUS Red
<p>Notes: Cannot be measured - linked to above implementation of the validation checklist.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST JAN 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : Supporting participants on their journey Employment / Further Education	TARGET No	ACTUAL No	STATUS Green
Notes:			

ECONOMIC DEVELOPMENT			DUE 1ST JAN 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : Receive bespoke mentoring tailored to each individual action plan	TARGET No	ACTUAL No	STATUS Green
Notes:			

ECONOMIC DEVELOPMENT			DUE 1ST JAN 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : Delivery of accredited training	TARGET Yes	ACTUAL No	STATUS Red
Notes: Training will commence once recruitment onto the programme has been completed.			

ECONOMIC DEVELOPMENT			DUE 1ST JAN 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : Recruitment onto specialist programme of support	TARGET Yes	ACTUAL No	STATUS Red
Notes: Recruitment onto the programme has commenced but will not be officially verified until Q4			

ECONOMIC DEVELOPMENT			DUE 1ST JAN 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : Number of people supported (cumulative)	TARGET 15	ACTUAL 23	STATUS Green
Notes: In Q2 we supported 23 in total, therefore, this overachievement covers the Q3 target. This figure also doesn't include the 2 disability focused programmes (Thrive and Graduate) which aim to support an additional 45 participants. The recruitment hasn't been completed for these programmes so while it shows as a 0 in Q3 by Q4 we will have recruited in full. Overall it is anticipated that our annual return will have supported 78 in total which exceeds the annual KPI target of 25.			

HR&OD			DUE 1ST JAN 26
258 : Staff Absenteeism : Average Rolling year absence	TARGET 14.5	ACTUAL 14.28	STATUS Green
Notes:			

COMMUNITIES			DUE 1ST JAN 26
259 : Glenavy Village Plan Actions: Installation of new playpark in Killultagh housing development by end of Q1	TARGET Yes	ACTUAL Yes	STATUS Green
<p>Notes: The Parks Department completed the installation of the new playpark. It was funded through the Small Settlements Fund and is now fully operational.</p>			

COMMUNITIES			DUE 1ST JAN 26
259 : Glenavy Village Plan Actions: Installation of new bus shelter at Lyngrove by end of Q2	TARGET Yes	ACTUAL No	STATUS Red
<p>Notes: This was installed in January. A further update will be provided in the Q4 report.</p>			

COMMUNITIES			DUE 1ST JAN 26
259 : Glenavy Village Plan Actions: Replacement of existing bins and increased capacity of bins in Glenavy area.	TARGET Yes	ACTUAL Yes	STATUS Green
<p>Notes:</p>			

COMMUNITIES			DUE 1ST JAN 26
259 : Glenavy Village Plan Actions: Establishment of a pedestrian crossing in the village of Glenavy.	TARGET No	ACTUAL No	STATUS Green
<p>Notes: The Department for Infrastructure (Dfi) has responded to the request for a pedestrian crossing on Glenavy Road, confirming that while a survey was conducted in November 2023, the location did not rank highly against other sites based on assessed need. Dfi uses a consistent, criteria-based process that considers pedestrian and vehicle volumes, traffic speed, road width, proximity to amenities, vulnerability of users, and collision history. Although the Glenavy Road site does not meet current thresholds for funding, it will remain on the Dfi list for future consideration should priorities or conditions change.</p>			

COMMUNITIES			DUE 1ST JAN 26
259 : Glenavy Village Plan Actions: Capacity building with local community groups (cumulative)	TARGET 3	ACTUAL 3	STATUS Green
<p>Notes: A community networking and update event was held at St Clare’s Community Hall, Glenavy, in December 2025, bringing together local community organisations to identify needs, share progress and support delivery of the Glenavy Village Plan. This session built on earlier engagement and strengthened coordination between local groups, Community Services and Community Planning. The December 2025 session provided an opportunity to present the latest position on the Glenavy Village Plan, confirm completed and in-progress actions, gather further community feedback, and reinforce shared priorities across physical, community and environmental themes. Community Planning will continue to engage with local networks and attend relevant Community Services connection events to share updates on progress, including actions that are completed, ongoing or no longer feasible, ensuring transparency and continued community involvement in delivery.</p>			

COMMUNITIES			DUE 1ST JAN 26
259 : Glenavy Village Plan Actions: Biodiversity projects with schools / woodland & horticulture events in Glenavy throughout year (cumulative)	TARGET 3	ACTUAL 3	STATUS Green
<p>Notes: A bulb planting session with completed with Ballymacrickett PS on Wednesday 10th December. Approximately 60 children participated in the planting and really enjoyed the activity.</p>			

OPERATIONAL SERVICES			DUE 1ST JAN 26
263 : Waste collection % of collected waste going to landfill through the residual waste treatment contract: Less than 10% of our collected waste will go to landfill	TARGET 10%	ACTUAL 0.31%	STATUS Green
<p>Notes:</p>			

FINANCE			DUE 1ST JAN 26
268 : Finance Prompt payments: % of supplier invoices paid within 10 days	TARGET 75%	ACTUAL 85.55%	STATUS Green
<p>Notes:</p>			

FINANCE			DUE 1ST JAN 26
268 : Finance Prompt payments: % of supplier invoices paid within 30 days	TARGET 92%	ACTUAL 96.11%	STATUS Green
<p>Notes:</p>			

Department : All

(Type = 'Corporate Plan')

Wednesday 18th of February 2026

Economic Development					
38 : New Jobs Number per annum					
Number of new jobs linked to economic development programmes (cumulative)	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual	15	40	70	160
		34	72	113	—
		* 1	* 2	* 3	
Notes:	<p>1 Belfast City Council – Go-Succeed PMO have not verified Qtr.1 numbers</p> <p>2 This is a cumulative figure, 38 jobs in Q2. LCCC still awaiting Belfast City Council – Go-Succeed PMO to verify Qtr.2 numbers</p> <p>3 Actual Total is a cumulative figure. New jobs for Q3 - 41. Belfast City Council, PMO still to verify Go Succeed numbers</p>				
Assets					
212 : Assets Rental from the Council's leased assets					
% Lettable areas within the Council's available leased assets	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual	80%	80%	80%	80%
		97%	97%	88.5%	—
		* 1	* 2	* 3	
Notes:	<p>1 The majority of the remaining lettable space within Bradford Court has been agreed for lease to a Government Agency. The two vacant units at Ballyoran have been agreed by way of license and the agreements are in progress with solicitors.</p> <p>2 There has been no change in the % Lettable areas within the Council's available leased assets since Q1. The tenancy of Bradford Court is due to increase going forward and will therefore impact on this KPI.</p> <p>3 Lease agreements have now been signed with NIO, however there are a total of 6 properties that we are in the process of completing the leases on.</p>				
Planning & Capital Development					
228 : Capital Programme Expenditure measured against Budget					
Cumulative % Expenditure against budget	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual	20%	40%	70%	95%
		62.54%	72.02%	78.33%	—
			* 1	* 2	
Notes:	<p>1 Committed spend within capital programme as at the end of period 6 (quarter 2) is 72.02%. This figures includes actual spend to date plus committed orders. This is mainly due to the profiled spend being committed by purchase order on the DIIB redevelopment project.</p> <p>2 Committed spend within capital programme as at the end of period 9 (quarter 3) is 78.33%. This figures includes actual spend to date plus committed orders. This is mainly due to the profiled spend being committed by purchase order on the DIIB redevelopment project.</p>				
Regeneration & Growth					
245 : Progress the Dundonald International Ice Bowl redevelopment. DIIB project proceeding to Construction Phase and building complete					
Building completion	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual	30%	40%	50%	60%
		30%	40%	50%	—
Environmental Health, Risk & Emergency Planning					
246 : Enhance burial provision Increase number of plots in line with outline business case					

Number of new grave plots in operation (cumulative)	Target	Jul 25	Oct 25	Jan 26	Apr 26
		50	150	300	400
	Actual	0 * 1	156 * 2	309 * 3	—
Notes:	<p>1 Contractor procured during Q1. Contractor commenced onsite in July 2025. A further update will be provided at the end of Q2.</p> <p>2 156 graves developed, with 98 available for release.</p> <p>3 309 graves available for sale</p>				

Innovation

247 : Further projects with BRCD: Destination Royal Hillsborough Programme including planning and award of contracts.

Planning permission by end Q2	Target	Jul 25	Oct 25	Jan 26	Apr 26
		No	Yes	Yes	Yes
	Actual	No	No * 1	No * 2	—

Notes:	<p>1 The key reasons for not achieving planning permission are as follows: - The complete set of design drawings were not provided to LCCC by the designers at the exact date they were requested, there was a delay with one drawing. - HED have not responded with their views on the revised drawings and given the Heritage aspect of this village it would be foolish to proceed without HED input. - DfI had a few minor issues with the new drawings and these needed to be amended by the design team</p> <p>2 Planning application was approved at Planning Committee on Monday 12th January 2026. This will be reflected in the Q4 KPI.</p>				
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Leisure & Community Wellbeing

262 : Health & Wellbeing Programmes & events

Number of Health & Wellbeing Programmes (cumulative)	Target	Jul 25	Oct 25	Jan 26	Apr 26
		20	40	60	80
	Actual	27 * 1	46 * 1	79 * 2	—

Notes:	<p>1 In quarter 2 there were an additional 19 health and wellbeing programmes delivered with 10 programmes delivered through Outreach and Inclusion and nine through the Health and wellbeing officer .</p> <p>2 In quarter 3 there were an additional 33 programmes; 14 were delivered by the health and wellbeing officer and 19 programmes were delivered by the outreach and inclusion officer.</p>				
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Number of participants on the Health & Wellbeing programmes (cumulative)	Target	Jul 25	Oct 25	Jan 26	Apr 26
		500	800	1300	1800
	Actual	1642 * 1	3380 * 2	6356 * 3	—

Notes:	<p>1 Subsequent to the KPI being set a number of new programmes such as Pilates in the park were introduced by the Wellbeing team and they have proven to be very popular. Given that a number of these activities are seasonal the numbers will reduce after Q2.</p> <p>2 In quarter 2 there were an additional 19 health and wellbeing programmes delivered with 10 programmes delivered through Outreach and Inclusion and nine through the Health and wellbeing officer. The Outreach and Inclusion programmes had 209 participants during this period while the health & wellbeing programmes had 1529 participants during this period, bringing the total to 19 programmes with 1738 participants in Quarter 2. Subsequent to the KPI being set a number of new programmes such as Pilates in the park were introduced by the Wellbeing team and they have proven to be very popular. Given that a number of these activities are seasonal the numbers will reduce after Q2. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health & Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.</p> <p>3 In Q3 there were an additional 2,976 participants in all of the health & wellbeing programmes. 510 participated in the outreach and inclusion programmes and 2466 in the health & wellbeing programmes. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health & Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.</p>				
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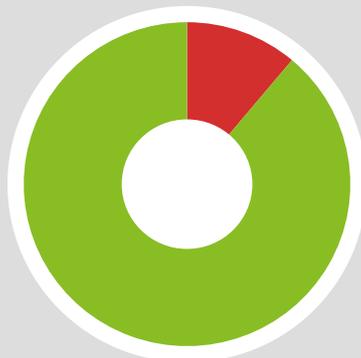
Number of Community Events (Cumulative)		Jul 25	Oct 25	Jan 26	Apr 26
		Target	25	50	75
	Actual	27 * 1	62 * 2	128 * 3	—
Notes:		<p>1 6 community events for Community Services, 10 Community Planning Events, 8 Age friendly events, 1 Mayors Parade, 2 Biodiversity</p> <p>2 In Q2 35 Community events were held: PCSP = 12 events Community Services = 6 C Planning = 5 (Youth Councils and Ballymacash event) Age Friendly = 9 (Summer scheme) and Dementia Friendly Community Training + Ballybeen Walking Group + Dementia Info Day = 3</p> <p>3 In Q3 66 Community Events; Age Friendly – 4 Events Community Planning - 16 events PCSP - 46 events involving 2,565 persons</p>			

Performance Summary

All

(Type = 'Corporate Plan')

Wednesday 18th of February 2026



Red = Target missed or Measure overdue
 Amber = Measure fallen slightly short/behind
 Green = Target met or exceeded
 Grey = Measure not yet due

Environmental Health, Risk & Emergency Planning	1 Green
Regeneration & Growth	1 Green
Planning & Capital Development	1 Green
Assets	1 Green
Economic Development	1 Green
Leisure & Community Wellbeing	3 Green
Innovation	1 Red

ECONOMIC DEVELOPMENT

DUE 1ST JAN 26

38 : New Jobs Number per annum: **Number of new jobs linked to economic development programmes (cumulative)**

TARGET
70

ACTUAL
113

STATUS
Green

Notes: Actual Total is a cumulative figure. New jobs for Q3 - 41. Belfast City Council, PMO still to verify Go Succeed numbers

ASSETS

DUE 1ST JAN 26

212 : Assets Rental from the Council's leased assets: **% Lettable areas within the Council's available leased assets**

TARGET
80%

ACTUAL
88.5%%

STATUS
Green

Notes: Lease agreements have now been signed with NIO, however there are a total of 6 properties that we are in the process of completing the leases on.

PLANNING & CAPITAL DEVELOPMENT

DUE 1ST JAN 26

228 : Capital Programme Expenditure measured against Budget: **Cumulative % Expenditure against budget**

TARGET
70%

ACTUAL
78.33%

STATUS
Green

Notes: Committed spend within capital programme as at the end of period 9 (quarter 3) is 78.33%. This figures includes actual spend to date plus committed orders. This is mainly due to the profiled spend being committed by purchase order on the DIIB redevelopment project.

REGENERATION & GROWTH

DUE 1ST JAN 26

245 : Progress the Dundonald International Ice Bowl redevelopment. DIIB project proceeding to Construction Phase and building complete: **Building completion**

TARGET
50%

ACTUAL
50%

STATUS
Green

Notes:

ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING

DUE 1ST JAN 26

246 : Enhance burial provision Increase number of plots in line with outline business case: **Number of new grave plots in operation (cumulative)**

TARGET
300

ACTUAL
309

STATUS
Green

Notes: 309 graves available for sale

INNOVATION

DUE 1ST JAN 26

247 : Further projects with BRCD: Destination Royal Hillsborough Programme including planning and award of contracts. : **Planning permission by end Q2**

TARGET
Yes

ACTUAL
No

STATUS
Red

Notes: Planning application was approved at Planning Committee on Monday 12th January 2026. This will be reflected in the Q4 KPI.

LEISURE & COMMUNITY WELLBEING			DUE 1ST JAN 26
262 : Health & Wellbeing Programmes & events : Number of Health & Wellbeing Programmes (cumulative)	TARGET 60	ACTUAL 79	STATUS Green
<p>Notes: In quarter 3 there were an additional 33 programmes; 14 were delivered by the health and wellbeing officer and 19 programmes were delivered by the outreach and inclusion officer.</p>			

LEISURE & COMMUNITY WELLBEING			DUE 1ST JAN 26
262 : Health & Wellbeing Programmes & events : Number of participants on the Health & Wellbeing programmes (cumulative)	TARGET 1300	ACTUAL 6356	STATUS Green
<p>Notes: In Q3 there were an additional 2,976 participants in all of the health & wellbeing programmes. 510 participated in the outreach and inclusion programmes and 2466 in the health & wellbeing programmes. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health & Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.</p>			

LEISURE & COMMUNITY WELLBEING			DUE 1ST JAN 26
262 : Health & Wellbeing Programmes & events : Number of Community Events (Cumulative)	TARGET 75	ACTUAL 128	STATUS Green
<p>Notes: In Q3 66 Community Events; Age Friendly – 4 Events Community Planning - 16 events PCSP - 46 events involving 2,565 persons</p>			

Committee:	Governance & Audit Committee
Date:	12th March 2026
Report from:	Performance Improvement Officer

Item for:	Decision
Subject:	Draft Performance Improvement Objectives & Projects 26/27

1.0	<u>Background and Key Issues:</u>
1.1	Council must identify Improvement Objectives each year to form part of an annual Performance Improvement Plan to meet the requirements of the Local Government Act (NI) 2014.
1.2	Attached under Appendix I is a copy of the DRAFT Performance Improvement Objectives and Projects for 2026/27.
1.3	Council selected two new Performance Improvement Objectives for 2025/26 after having the same objectives for 4 years with different improvement projects each year.
1.4	It is proposed that we will continue with the two Performance Improvement Objectives from 2025/26 into the new financial year.
1.5	These objectives relate to most of the themes of the Corporate Plan. The justification for doing so is as follows: <ul style="list-style-type: none"> Objective 1 is an objective within the Civic Leadership theme of the Corporate Plan 2024-28. Objective 2 is outlined as an objective within the People and Prosperity themes of the Corporate Plan 2024-28.
1.6	Seven improvement projects are being proposed to deliver upon the objectives. Of the seven, one is continuing from 2025/26 and the other six are new projects.
1.7	The projects focus on enhancing planning services, digital platforms, sports facilities, community wellbeing, and resilience.
1.8	It is planned to carry out a public consultation on these during April and May 2026.
1.9	Any comments and suggested amendments from consultees will be incorporated where appropriate in producing the final Performance Improvement Plan which will be brought to this Committee in June.
1.10	Once the plan has been approved by Council it must be published by 30th June 2026, to meet the requirements of the legislation.
1.11	Appendix II is a copy of the Equality screening for the Performance Improvement Objectives and Projects 2026/27.
2.0	<u>Recommendation</u> It is recommended that Members agree to the Performance Improvement Objectives and Projects for 2026/27.
3.0	<u>Finance and Resource Implications</u> N/A

4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
4.1	Has an equality and good relations screening been carried out?	Yes
4.2	Brief summary of the key issues identified and proposed mitigating actions or rationale why the screening was not carried out.	Screen out with mitigation (see appendix II)
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions or rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.

Appendices:	Appendix I – DRAFT Performance Improvement Objectives & Projects 2026/27 Appendix II – Equality screening for PI Objectives & Projects 2026/27
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Proposed PI Objectives and Projects 2026/27

Performance Improvement Objective	Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme(s)	Continuing or New?	Detail of project (Measure of Success TBC)
Deliver better services that meet people's needs.	We will continue to improve the processing times of planning applications	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	Civic Leadership <i>Deliver high-quality, cost-effective services that meet people's needs, making use of new approaches to data-driven decision-making, continual improvement, innovation and performance management</i>	Our Community Where we live	Continuing, the Planning Service Improvement Programme is a 2+ year programme.	<p>Planning Implementation of the validation checklist by end of Q2</p> <p>Proportion of invalid applications returned within 5 working days Q3-75%, Q4-90%</p> <p>Reduce the % of older applications that are more 18 months old (*based on ?? older applications as at 31st March 2026 TBC) Q1 – 20%, Q2 – 40%, Q3 -70%, Q4 - 90%</p> <p>Local planning applications processed within an average of 22.5 weeks. Q1 – 30, Q2 – 27.5, Q3 – 22.5, Q4 – 20</p>
	We will deliver enhanced digitised services	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	Civic Leadership <i>Further the use of digital technology to improve efficiency and increase access customer access to services</i>	Our Community	New	<p>Innovation Enhancement of customer digital platforms to improve customer experience. Eg digital depot.</p> <ul style="list-style-type: none"> Q1 Project Implementation Officer in post Q1 Delivery of digital equipment. Q2 Implementation of digital depot. Q3 Implementation & Training of staff. Q4 Digital Depot 'Go Live'. <p>Tourism Enhance the existing Digital Sculpture Trail App (currently focused on Hillsborough Forest) to cover the wider Royal Hillsborough village, including curated routes, added attractions and visitor</p>

Proposed PI Objectives and Projects 2026/27

Performance Improvement Objective	Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme(s)	Continuing or New?	Detail of project (Measure of Success TBC)
						<p>information linked to key assets such as Hillsborough Castle. Introduce an incentives/voucher feature with local businesses (attractions, accommodation, eateries) to encourage visitors to spend more time in the village and increase local spend.</p> <p>Quarterly KPIs (TBC): downloads/active users; user engagement (routes/check-ins/time in app); voucher uptake/redemptions; click-throughs to partner booking/pages; village vs forest-only engagement; number of partners onboarded; customer satisfaction feedback; country of origin.</p>
	We will deliver new improved facilities at Aghalee Sports Pavillion and SEYCON as standard design concepts	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	Prosperity <i>Continue our capital investment in facilities</i>	Our Community Where we live	New	<p>Assets</p> <p>We will deliver new changing room facilities and accessible public toilets in Aghalee.</p> <ul style="list-style-type: none"> Q1 Project will be tendered. Q2 Tenders returned, evaluated, awarded and commencement on site. Q3 On site. Q4 Practical completion. <p>We will deliver new changing room facilities at SEYCON</p> <ul style="list-style-type: none"> Q1 Preparation of detailed design. Q2 Finalising detailed design and tender documents. Q3 2026 – 27 Project tendered, returned, evaluated, and awarded. Q4 2026 – 27 Commencement on site.

Proposed PI Objectives and Projects 2026/27

Performance Improvement Objective	Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme(s)	Continuing or New?	Detail of project (Measure of Success TBC)
Support our people to thrive in vibrant communities	We will launch a volunteering scheme engaging people of all backgrounds and increasing the level of residents who play an active role in civic society.	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	People <i>Promote volunteering and participation in public and community life, developing community ownership and management of local assets and facilities</i>	Health & Wellbeing Our Community	New	<p>Communities Volunteering Programme for Community & Voluntary Sector</p> <ul style="list-style-type: none"> Q1 Development of programme with 'Volunteer Now' & Community Planning partners Q2 Supporting the recruitment of volunteers in the Community & Voluntary sector Q3 Training of volunteers through a capacity building programme Q4 Host a volunteering & community benefit roadshow celebrating volunteering & showcasing opportunities within our communities <p>HR&OD Volunteering Scheme for Staff</p> <ul style="list-style-type: none"> Q3 Implement staff volunteering scheme (by end of Q3) Q4 Baseline participation in volunteering scheme (by end of Q4)
	Our communities have engaged with expanded Council-supported safety initiatives which protect the most vulnerable in our society	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	People <i>Work with partners to build the capacity of community groups and sports clubs to attract more people of all ages to participate in community life</i>	Health & Wellbeing Our Community	New	<p>Communities EVAWG (ending violence against women and girls) initiatives.</p> <ul style="list-style-type: none"> Q1 Design & develop programme Q2 Launch programme Q3 Implementation of programme Q4 Review & monitoring <p>Sport Services Defib provision and training provided to community hubs.</p> <ul style="list-style-type: none"> Q1 Develop programme

Proposed PI Objectives and Projects 2026/27

Performance Improvement Objective	Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme(s)	Continuing or New?	Detail of project (Measure of Success TBC)
						<ul style="list-style-type: none"> Q2 Launch, advertise & assess need Q3 Implementation of programme Q4 Training provided & roll out of defibs
	We will provide additional opportunities and widen the Health & Wellbeing programme through the PARS initiative.	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	People <i>Work collaboratively to ensure the sustaining of good physical and mental health, being proactive in our roles to protect the vulnerable in our community</i>	Health & Wellbeing Our Community	New	Sport Services PARS Programme <ul style="list-style-type: none"> Q1 Identify additional opportunities Q2 Promotion and awareness of PARS Q3 Practical implementation Q4 Evaluation (testimonies)
	We will engage with community groups to improve community resilience across the Council area	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation Sustainability	Civic Leadership <i>Be resilient in emergency situations, providing leadership for our community</i> Planet <i>Sustainability</i>	Our Community Where we live	New	Environmental Health Emergency planning - building resilient communities. (Dundonald / Anahilt) Building capacity within these communities to respond to emergencies. <ul style="list-style-type: none"> Installation of community support facility to enable communities to be first responders. Work in partnership with our statutory partners eg DfI rivers to increase resilience of local community.

Lisburn & Castlereagh City Council

Section 75 Equality and Good Relations Screening template

Part 1. Information about the activity/policy/project being screened

Name of the activity/policy/project

Performance Improvement Objectives 2026/27

There are 2 Performance Improvement Objectives for 2026/27:

- We will deliver better services that continue to meet people's needs; and
- We will support our people to thrive in vibrant communities.

Is this activity/policy/project – an existing one, a revised one, a new one?

These are continuing objectives from the 25/26 financial year.

The Council has a statutory duty under Part 12 of the Local Government Act (Northern Ireland) 2014 to set improvement objectives and have arrangements in place to secure their achievement. A number of performance targets are also set by Central Government departments in respect of job creation, planning and waste management.

Once these objectives are agreed by Council a Performance Improvement Plan for 2026-27 will be developed and will set out what we will do in the year ahead to deliver on our statutory duty, as listed in Part 12 of the Local Government Act 2014. These 'duties' relate to sections 84(1), 85(2) and 89(5) of the Act, whereby the Council has a statutory responsibility to make arrangements to:

- secure continuous improvement;
- secure achievement of its improvement objectives;
- exercise its functions so that any Central Government Departmental specified standards are met.

What are the intended aims/outcomes the activity/policy/project is trying to achieve?

The annual Performance Improvement objectives detail the areas that the Council will focus on in the financial year ahead to demonstrate improvement.

Who is the activity/policy/project targeted at and who will benefit? Are there any expected benefits for specific Section 75 categories/groups from this activity/policy/project? If so, please explain.

The PI Objectives are aimed at everyone who uses LCCC services and is not targeted at any specific equality group.

Who initiated or developed the activity/policy/project?

The PI Objectives were drafted by the Council's Performance Improvement Officer following discussions with senior management and will be out for public consultation during April and May 2026. They were approved by the Corporate Management Team in January 2026 and will be presented to the Governance & Audit Committee for approval in March 2026.

Who owns and who implements the activity/policy/project?

The PI Objectives will form the basis of the PIP (Performance Improvement Plan) which is a corporate document that is written and published annually. It provides a rationale for why we have chosen our annual improvement objectives and details the expected outcomes of these. Progress is monitored, co-ordinated and reported on by the Performance Improvement Officer to CMT and the Governance & Audit Committee.

Are there any factors which could contribute to/detract from the intended aim/outcome of the activity/policy/project?

Yes

If yes, give brief details of any significant factors.

Legislative

Other

While commitments are included in the PI Objectives, it can be a challenge to ensure that they are actually implemented as intended. The successful implementation of the PI Objectives is dependent on awareness of the PIP and service delivery across all Council functions.

Who are the internal and external stakeholders (actual or potential) that the activity/policy/project will impact upon? Delete if not applicable

Staff

Service users

Other public sector organisations eg NIAO and DfC

Voluntary/community/trade unions

Other Elected Members

Other policies/strategies/plans with a bearing on this activity/policy/project

Name of document/activity/policy	Who owns or implements document/activity/policy?
1.The Council’s Corporate Plan & Ambitions 2024 - 2028 lccc-corporate-plan-2024-2028-web (lisburncastlereagh.gov.uk)	Chief Executive’s Office/all services
2. Community Plan 2017-2032 community_plan_2017-2032_email-pdf (lisburncastlereagh.gov.uk)	Leisure & Community Wellbeing
3. HR policies and activity	HR & OD
4. Equality Scheme and associated equality policies and plans	Equality Officer
5. Part 12 of the Local Government Act (Northern Ireland) 2014 https://www.legislation.gov.uk/ni/2014/8/part/12/enacted	Department for Communities (DfC)

Available evidence

What evidence/information (qualitative and quantitative) have you gathered or considered to inform this activity/policy? Specify details for each Section 75 category.

A range of sources have been considered, including the previous Performance Improvement Plans; analysis of previous PIPs, evaluations of consultations, other Council PIPs, etc.

Sec 75 Category	Details of evidence/information
Religious Belief	NI Census 2021 data for the Lisburn and Castlereagh area: 58% Protestant (or other Christian) 27% Catholic 2% Other 13% None
Political Opinion	National identity is often used as an indicator of political opinion – unionist/nationalist. Analysis of Census 2021 data for LCCC showed: 41% identified as British 16% Irish 21% Northern Irish Political party representation on LCCC from local government elections 2023 (40 Members): DUP – 14 UUP – 6 Alliance –13 Sinn Fein – 4 SDLP – 2 Independent - 1
Racial Group	Census 2021 statistics suggest 87% of the LCCC population were born in N Ireland and the district has a range of nationalities, including a small number of Syrian refugees. 3.6% of residents speak languages other than English as their first language.
Age	Census 2021 population estimates for LCCC area were: 0-14 years – 19% 15-39 years – 30% 40-64 years – 33%

	65+ years – 18%
Marital Status	The 2021 census records for people over the age of 16 for the LCCC area: Single (never married or never registered a same-sex civil partnership) – 33% Married – 52% Separated – 3% Divorced or formerly in a civil partnership which is now legally dissolved – 6% Widowed or surviving partner from a civil partnership – 6%
Sexual Orientation	Census 2021 data – sexual orientation. Straight or heterosexual 91% Gay, lesbian, bisexual or other sexual orientation 2% Prefer not to say or not stated 7%
Men & Women Generally	The 2021 census population of LCCC local government district was 149,106, of which 49% were male and 51% were female. There is no official statistic on the number of people in N Ireland who identify as Transgender or non-binary but referrals to advice services are increasing year on year which suggests a small but growing minority. Women are significantly under-represented as Elected Members on LCCC with only 17.5% female councillors (NI average - 26.4%). At present (April 2021), women are over-represented in the senior management team (3 of 5 (60%) are female).
Disability	The 2021 Northern Ireland Census collected data on ‘persons with a limiting long-term illness’ which covered any long-term illness, health problem or disability which limits daily activities or work. Statistics for LCCC showed: 21% of people had a long-term health problem or disability that limited their day-to-day activities; 81% of people stated their general health was either good or very good;
Dependants	2021 Census data: 14% of people stated that they provided unpaid care to family, friends, neighbours or others.

	<p>People with dependants includes parents of young children, parents of older dependant or disabled people, carers of elderly family members and others.</p>
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Needs, experiences and priorities: Taking into account the information referred to above, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular activity/policy/decision?

Specify details for each of the Section 75 categories

Sec 75 Category	Details of needs/experiences/priorities
Religious Belief	No evidence of different experience or needs of people according to religion in relation to these objectives or the Performance Improvement Plan.
Political Opinion	No evidence of different experience or needs of people depending on their political opinion in relation to these objectives or the Performance Improvement Plan.
Racial Group	People from minority ethnic backgrounds may experience barriers in accessing or understanding information about the Council’s Performance Objectives and the Performance Improvement Plan, particularly where English is not their first language. There may also be lower awareness of how performance objectives relate to their communities. These needs can be addressed through targeted communication, translation of documents, translators provided at consultation events as appropriate and engagement with relevant community and support groups.
Age	Some older or younger people may experience barriers in accessing or understanding information about the Performance Improvement Plan due to digital exclusion, literacy levels, or differing communication preferences. Consideration of accessible formats, a mix of engagement methods and accessibility of consultation events will help mitigate these issues.

Marital Status	No different experience/needs identified
Sexual Orientation	No different experience/needs identified
Men & Women Generally	No different experience/needs identified
Disability	Some disabled people may need to have information about the objectives or the Performance Improvement Plan (PIP) provided in accessible formats as a reasonable adjustment. Consultation events will need to consider accessibility for disabled people.
Dependants	Consultation events should consider accessibility for those with dependants, for example offering online as well as in person events.

Part 2. Screening questions

1 What is the likely impact on equality of opportunity for those affected by this activity/policy, for each of the Section 75 equality categories?

Sec 75 Category	Details of activity/policy impact	Level of impact (minor/major/none*)
Religious Belief	The Performance Objectives and the detail of the PIP will potentially benefit everyone, regardless of religious belief or any other personal characteristic	No differential impact identified
Political Opinion	The Performance Objectives and the detail of the PIP will potentially benefit everyone, regardless of political opinion	No differential impact identified
Racial Group	While some groups may experience barriers in accessing information, the Performance Objectives and PIP do not in themselves create differential impacts. Identified communication and engagement needs can be	No differential impact identified

	mitigated through inclusive consultation practices.	
Age	The Performance Objectives and the detail of the PIP do not directly affect services or access based on age. Any potential barriers to understanding or engagement can be mitigated through accessible formats and varied engagement approaches.	No differential impact identified
Marital Status	The Performance Objectives and the detail of the PIP will potentially benefit everyone, regardless of marital status	No differential impact identified
Sexual Orientation	The Performance Objectives and the detail of the PIP will potentially benefit everyone, regardless of their sexual orientation	No differential impact identified
Men & Women Generally	The Performance Objectives and the detail of the PIP will potentially benefit everyone, regardless of their sexual identity	No differential impact identified
Disability	The Performance Objectives and the detail of the PIP will potentially benefit everyone. Accessibility requirements can be addressed through reasonable adjustments and inclusive consultation.	No differential impact identified
Dependants	The Performance Objectives and the detail of the PIP will potentially benefit everyone. Flexible engagement methods can mitigate any potential barriers to participation.	No differential impact identified

*See Appendix 1 for details.

2(a) Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?

Sec 75 Category	IF Yes, provide details	If No, provide details
Religious Belief		None identified through this screening but can be kept under review.
Political Opinion		None identified through this screening but can be kept under review.
Racial Group	Yes, the Performance Objectives and PIP will be translated if necessary for anyone who does not have English as a first language. Translators will be provided at consultation events if required.	
Age	Yes, any older, or younger person who needs additional help to understand the Performance Objectives and PIP will have their needs met. For example, easy read, a staff member phoning someone to rather than written communication, etc. Engagement to take place with the Age Friendly and Youth Forums.	
Marital Status		None identified
Sexual Orientation		None identified
Men & Women Generally		None identified
Disability	The Performance Objectives and PIP can be provided in alternative formats to ensure accessibility for people with certain disabilities. Sign language interpreters will attend consultation, and this	

	will be promoted widely. We are prepared to make any other reasonable adjustments for disability.	
Dependants		None identified

Equality Action Plan 2021-2025

Does the activity/policy/project being screened relate to an action in the Equality Action Plan 2021-2025? No

2(b) DDA Disability Duties (see Disability Action Plan 2021-2025)

Does this policy/activity present opportunities to contribute to the actions in our Disability Action Plan:

- to promote positive attitudes towards disabled people?
- to encourage the participation of disabled people in public life?

Yes, one of the improvement projects is specifically about enhancement of facilities, specifically accessible public toilets. Disabled people and support groups will be specifically targeted in the public consultation on draft performance improvement objectives. Accessibility of documents and consultation is a priority, and the Equality Screening will be updated following Consultation with disabled people.

3 To what extent is the activity/policy/project likely to impact on good relations between people of different religious belief, political opinion or racial group?

Good Relations Category	Details of activity/policy impact	Level of impact (minor/major/none*)
Religious Belief		No specific impact identified through this screening exercise
Political Opinion		No specific impact identified
Racial Group		No specific impact identified

*See Appendix 1 for details.

4 Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?

Good Relations Category	IF Yes, provide details	If No, provide details
Religious Belief		Not at this time, but can be kept under review
Political Opinion		As above
Racial Group		As above

Multiple identity

Provide details of any data on the impact of the activity/policy/project on people with multiple identities. Specify relevant Section 75 categories concerned.

We are aware that most people have more than one identity and may experience additional disadvantage accordingly. We are proposing measures to accommodate the particular needs of different groups and multiple identity has been taken into account in developing these objectives and plan.

Part 3. Screening decision/outcome

Equality and good relations screening is used to identify whether there is a need to carry out a **full equality impact assessment** on a proposed policy or project. There are 3 possible outcomes:

- 1) **Screen out** - no need for a full equality impact assessment and no mitigations required because no relevance to equality, no negative impacts identified or only very minor positive impacts for all groups. This may be the case for a purely technical policy for example.
- 2) **Screen out with mitigation** - no need for a full equality impact assessment but some minor potential impacts or opportunities to better promote equality and/or good relations identified, so mitigations appropriate. Much of our activity will probably fall into this category.
- 3) **Screen in for full equality impact assessment** – potential for significant and/or potentially negative impact identified for one or more groups so

proposal requires a more detailed impact assessment. [See Equality Commission guidance on justifying a screening decision.]

Choose only one of these and provide reasons for your decision and ensure evidence is noted/referenced for any decision reached.

Screening Decision/Outcome	Reasons/Evidence
<p>Option 1</p> <p>Screen out – no equality impact assessment and no mitigation required [go to Monitoring section]</p>	
<p>Option 2</p> <p>Screen out with mitigation – some potential impacts identified but they can be addressed with appropriate mitigation or some opportunities to better promote equality and/or good relations identified [complete mitigation section below]</p>	<p>The Annual Performance Plan and Performance Improvement Plan are high-level strategic documents that do not introduce new policies, change eligibility, alter service delivery, or allocate resources in a way that would impact Section 75 groups, and have therefore been screened out of a full Equality Impact Assessment (EQIA).</p> <p>Any barriers to accessing information or participating in consultation will be addressed through existing policies and practices, including accessible information, reasonable adjustments, and inclusive engagement. Consultation feedback will be reviewed for equality implications, and the screening decision will be reconsidered if any adverse or differential impacts are identified.</p>
<p>Option 3</p> <p>Screen in for a full Equality Impact Assessment (EQIA)</p> <p>[If option 3, complete timetabling and prioritising section below]</p>	

Mitigation (Only relevant to Option 2)

Can the activity/policy/project plan be amended or an alternative activity/policy introduced to better promote equality of opportunity and/or good relations?

If so, give the **reasons** to support your decision, together with the proposed changes/amendments or alternative activity/policy and ensure the mitigations are included in a revised/updated policy or plan.

Disabled people and support groups will be specifically targeted in the public consultation on draft performance improvement objectives for 2026-27.

Consultation events will consider the needs of certain groups by ensuring accessibility for disabled and older people, those who do not have English as a first language and those who have caring responsibilities. Examples include sign language interpreters (and promotion of), offering online events as well as in person and ensuring requests for any other reasonable adjustments are supported as fully as possible. Equality Screening will be provided with consultation documents and updated following consultation.

Following consultation, we will continue to make reasonable adjustments for disabled people. For example, the objectives and PIP can be provided in accessible formats. Key documents will be provided in Easy Read format.

As people who do not have English as a first language may have difficulty understanding the Performance Improvement Objectives / PIP, translation will be provided if required.

If an older, or younger person has difficulty understanding the PIP, additional efforts will be made to help ensure they are not disadvantaged.

Timetabling and prioritising for full EQIA (only relevant to Option 3) - N/A

If the activity/policy has been '**screened in**' for full equality impact assessment, give details of any factors to be considered and the next steps for progressing the EQIA, including a proposed timetable.

Is the activity/policy affected by timetables established by other relevant public authorities? Yes/No. If yes, please provide details.

Part 4. Monitoring

Public authorities should consider the guidance contained in the Commission’s Monitoring Guidance for Use by Public Authorities (July 2007).

Effective monitoring will help a public authority identify any future adverse impact arising from the activity/policy which may lead the public authority to conduct an equality impact assessment, as well as help with future planning and activity/policy development.

What will be monitored and how? What specific equality monitoring will be done? Who will undertake and sign-off the monitoring of this activity/policy and on what frequency? Please give details:

All services and departments will carry out regular monitoring of their contribution to the PIP within their areas, including equality monitoring where relevant.

The outcomes of PI Objectives and PIP will be monitored and reported upon a quarterly basis through CMT & Governance & Audit Committee by the Performance Improvement Officer, who reports to the Head of HR & Organisational Development.

Part 5 - Approval and authorisation

	Position/Job Title	Date
Screened by: Kerrie-Anne McKibbin	Performance Improvement Officer	26/01/26
Reviewed by: Annie Wilson	Equality Officer	05/02/26
Approved by: Greg Bowkett	Head of Human Resources & Organisation Development	16/02/26

Note: On completion of the screening exercise, a copy of the completed Screening Report should be:

- approved and ‘signed off’ by a senior manager responsible for the activity/policy
- included with Committee reports, as appropriate

- sent to the Equality Officer for the quarterly screening report to consultees, internal reporting and publishing on the LCCC website
- shared with relevant colleagues
- made available to the public on request.

Evidence and documents referenced in the screening report should also be available if requested.

Appendix 1 – Equality Commission guidance on equality impact

*Major impact:

- a) The policy/project is significant in terms of its strategic importance;
- b) Potential equality matters are unknown, because, for example, there is insufficient data upon which to make an assessment or because they are complex, and it would be appropriate to conduct an equality impact assessment in order to better assess them;
- c) Potential equality and/or good relations impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
- d) Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy about which there are concerns amongst affected individuals and representative groups, for example in respect of multiple identities;
- e) The policy is likely to be challenged by way of judicial review;
- f) The policy is significant in terms of expenditure.

Minor impact

- a) The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
- b) The policy, or certain proposals within it, are potentially unlawfully discriminatory, but this possibility can readily and easily be eliminated by making appropriate changes to the policy or by adopting appropriate mitigating measures;
- c) Any asymmetrical equality impacts caused by the policy are intentional because they are specifically designed to promote equality of opportunity for particular groups of disadvantaged people;
- d) By amending the policy there are better opportunities to better promote equality of opportunity and/or good relations.

No impact (none)

- a) The policy has no relevance to equality of opportunity or good relations;
- b) The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity or good relations for people within the equality and good relations categories.

Revised Template @ April 2022

Committee:	Governance & Audit
Date:	12 March 2026
Report from:	Head of Environmental Health, Risk and Emergency Planning

Item for:	Decision
Subject:	Corporate Risk Register

1.0	<u>Background and Key Issues</u>
1.1	This report highlights the key corporate risks (Appendix I) currently recorded, their inherent and residual scores, and the strategic implications for Council oversight.
1.2	<p>Emergency Planning / Business Continuity (CRR 002)</p> <ul style="list-style-type: none"> • Risk: Inability to respond effectively to command, control and coordination arrangements or concurrent emergencies. • Owner: Head of Environmental Health, Risk & Emergency Planning • Inherent Risk: 12 • Residual Risk: 6 (Stable) • Comment: Core resilience arrangements in place.
1.3	<p>Capital Programme (CRR 004)</p> <ul style="list-style-type: none"> • Risk: Failure to deliver agreed capital programme outcomes due to affordability or third-party funding changes. • Owner: Head of Planning • Inherent Risk: 12 • Residual Risk: 6 (Stable) • Comment: Capital affordability considerations given budgetary pressures.
1.4	<p>Cyber Security (CRR 006)</p> <ul style="list-style-type: none"> • Risk: Cyberattack leading to major system outage or data loss. • Owner: Director Organisation Development & Innovation • Inherent Risk: 16 • Residual Risk: 12 (Stable) • Comment: One of the highest-rated risks; ongoing mitigations reduce but do not eliminate exposure.
1.5	<p>Financial Sustainability (CRR 007)</p> <ul style="list-style-type: none"> • Risk: Inability to deliver a balanced budget and maintain long-term financial resilience. • Owner: Head of Finance • Inherent Risk: 16 • Residual Risk: 9 (Stable) • Comment: Risk reflects external financial constraints and long-term sustainability challenges.
1.6	<p>Procurement (CRR 009)</p> <ul style="list-style-type: none"> • Risk: Non-compliance with procurement and contract rules leading to financial/reputational loss or litigation. • Owner: Head of Assets • Inherent Risk: 9 • Residual Risk: 6 (Stable) • Comment: Controls are maturing.

1.7	<p>Burial Grounds Capacity (CRR 011)</p> <ul style="list-style-type: none"> • Risk: Insufficient burial ground capacity within the Council area. • Owner: Head of Environmental Health, Risk & Emergency Planning • Inherent Risk: 12 • Residual Risk: 9 (Stable) • Comment: Short / Medium term provision acquired. Long-term planning required to ensure capacity meets population demand.
1.8	<p>Dundonald International Ice Bowl (DIIB) Project (CRR 012)</p> <ul style="list-style-type: none"> • Risk: Project may not be delivered in line with agreed business case due to scale, capital investment requirements, and the transformational nature of the programme. • Owner: Director Leisure & Community Wellbeing • Inherent Risk: 12 • Residual Risk: 9 (Stable) • Comment: A significant transformation project with major financial and operational dependencies.
1.9	<p>Information Governance (CRR 013)</p> <ul style="list-style-type: none"> • Risk: Inadequate information governance controls leading to non-compliance. • Owner: Director Finance & Corporate Services • Inherent Risk: 16 • Residual Risk: 9 (Stable) • Comment: High inherent risk reflecting the Council's data volumes and legislative exposure.
1.10	<p>Compliance (CRR 014)</p> <ul style="list-style-type: none"> • Risk: Financial penalties due to late or incorrect statutory returns to government agencies. • Owner: Director Finance & Corporate Services • Inherent Risk: 12 • Residual Risk: 12 (No change) • Comment: New Risk recently escalated from departmental to corporate level.
1.11	<p>Overall Position</p> <ul style="list-style-type: none"> • All risks have clear owners and defined mitigation actions. • Several high inherent risks (Cyber Security, Financial Sustainability, Information Governance). • Most residual risks remain stable, indicating effective mitigations.
1.12	<p>Proposed Deep-Dive Risks for 2026/27</p> <p>In accordance with the Council's Risk Management Strategy, and the established approach of selecting two corporate risks per annum for deep-dive analysis, it is proposed that the following risks are brought forward for the 2026/27 financial year:</p> <ul style="list-style-type: none"> • CRR 014 – Compliance selected as it is a newly escalated corporate risk and remains residually high. • CRR 002 – Emergency Planning / Business Continuity recommended due to: <ul style="list-style-type: none"> ○ The increasing frequency and severity of weather-related events, and ○ 2021 was the last to deep-dive review, making it the risk least recently subjected to deep-dive analysis.
2.0	<p><u>Recommendation</u></p> <p>It is recommended that Members:</p> <ol style="list-style-type: none"> 1. Note the Corporate Risk Register (Appendix I). 2. Agree the proposed deep-dive risks for 2026/27.

3.0	<p><u>Finance and Resource Implications</u> Not Applicable.</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	<p>Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out</p> <p>Not required – Internal documentation for Noting only.</p>	
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	<p>Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.</p> <p>Not required – Internal documentation for Noting only.</p>	

Appendices:	Appendix I - Corporate Risk Register
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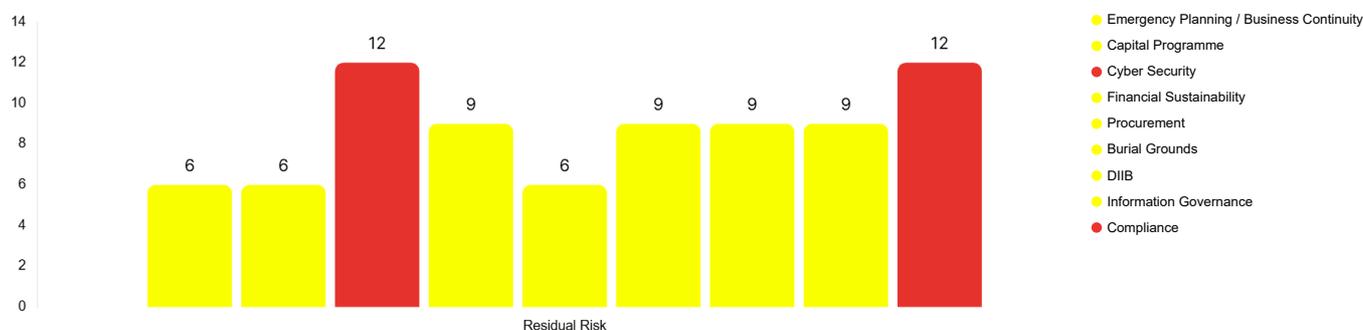


LCCC CORPORATE RISK LIVE DASHBOARD

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

CORPORATE SUMMARY

Corporate Risk Summary



CORPORATE RISK REGISTER

Corporate Risks

High Risk	Ref.	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
🚩	CRR 002	Emergency Planning / Business Continuity	Inability to respond to Command, Control & Coordination arrangements or concurrent emergencies resulting in impact on resilience.	HOS Environmental Health, Risk & Emergency Planning	12	CRR 2 Emergency Planning / Business Continuity	6	↔	
🚩	CRR 004	Capital Programme	Potential failure to deliver the agreed outcomes of the capital programme as a result of affordability or changes in third party funding arrangements.	HOS Planning	12	CRR 4 Capital Programme	6	↔	
🚩	CRR 006	Cyber Security	Cyber attack resulting in significant outage or data loss.	Director Organisation Development & Innovation	16	CRR 6 Cyber Security	12	↔	
🚩	CRR 007	Financial Sustainability	Failure to deliver balanced budget and longer term financial resilience and sustainability.	HOS Finance	16	CRR 7 Financial Sustainability	9	↔	
🚩	CRR 009	Procurement	Non compliance with procurement and contract regulations, policies and processes resulting in reputation/financial loss and risk of litigation.	HOS Assets	9	CRR 9 Procurement	6	↔	
🚩	CRR 011	Burial Grounds	Risk of insufficient LCCC burial ground capacity within the Council area.	HOS Environmental Health, Risk & Emergency Planning	12	CRR 011 Burial Grounds	9	↔	
🚩	CRR 012	DIIB	Risk of not delivering the DIIB project in line with agreed business case due to the significant Capital Investment representation on LCCCs Capital Programme and significant transformational project to modernise the facility.	Director of Leisure & Comm Wellbeing	12	CRR 012 DIIB	9	↔	
🚩	CRR 013	Information Governance	Inadequate controls relating to information governance leading to non compliance.	Director of Finance & Corporate Services	16	FCS 5 Information Governance	9	↔	
🚩	CRR 014	Compliance	Potential risk of financial penalties through late or incorrect returns to government agencies.	Director of Finance & Corporate Services	12	FCS 7 Compliance	12	*	Escalated from Finance & Corporate Service Departmental Risk Register to Corporate Risk Register.

Committee:	Governance and Audit Committee
Date:	12 th March 2026
Report from:	Internal Audit Manager

Item for:	Noting
Subject:	Global Internal Audit Standards Gap Analysis

1.0	<p><u>Background and Key Issues</u> Purpose of this report is to present to the Committee a GAP analysis against the Global Internal Audit Standards of the Council's Internal Audit Function.</p> <p>Global Internal Audit Standards guide the worldwide professional practice of internal auditing and serve as a basis for evaluating and elevating the quality of the internal audit function. At the heart of the Standards are 15 guiding principles that enable effective internal auditing. Each principle is supported by standards that contain requirements, considerations for implementation, and examples of evidence of conformance. Together, these elements help internal auditors achieve the principles and fulfil the Purpose of Internal Auditing.</p> <p>In September 2025 a report was brought to this Committee called Global Internal Audit Standards (GIAS) - Internal Audit Self-Assessment against CIPFA UK Public Sector Application Note. This report gave detailed requirements of the Application Note and the self-assessment was attached at Appendix 1.</p> <p>We generally comply with all relevant points within the Global Internal Audit standards including the CIPFA Application Note with only minor improvements needed. An action plan of proposed recommendations will be brought to the attention of the G&A in June 2026.</p>	
2.0	<p><u>Recommendation</u> Members of the Governance & Audit Committee are asked to note the contents of the report.</p>	
3.0	<p><u>Finance and Resource Implications</u> None</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out	N/A
	Reporting only on Internal Audit's compliance with the new GIAS	
	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.	N/A
	Reporting only on Internal Audit's compliance with the new GIAS	

Appendices:	Global Internal Audit Standards Gap Analysis
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2025/26

Internal Audit
Global Internal Audit Standards
Gap Analysis
12th March 2026

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1. Introduction & Status Summary

1.1 Purpose

The main purpose of this report is to summarise a self-assessment of Internal Audits compliance to the new Global Internal Audit Standards and identify areas where improvements can be made.

In September 2025 a report was brought to this Committee called Global Internal Audit Standards (GIAS) - Internal Audit Self-Assessment against CIPFA UK Public Sector Application Note. This report gave detailed requirements of the Application Note and the self-assessment was attached at Appendix 1.

Copies of the CIPFA UK Public Sector Application Note and the condensed Global Internal Audit Standards were provided at the same meeting.

1.2 Context

Global Internal Audit Standards guide the worldwide professional practice of internal auditing and serve as a basis for evaluating and elevating the quality of the internal audit function. At the heart of the Standards are 15 guiding principles that enable effective internal auditing. Each principle is supported by standards that contain requirements, considerations for implementation, and examples of evidence of conformance. Together, these elements help internal auditors achieve the principles and fulfil the Purpose of Internal Auditing.

The Standards are organised into five domains:

- Domain I: Purpose of Internal Auditing.
- Domain II: Ethics and Professionalism.
- Domain III: Governing the Internal Audit Function.
- Domain IV: Managing the Internal Audit Function.
- Domain V: Performing Internal Audit Services.

Domains II through V contain the following elements:

- Principles: broad descriptions of a related group of requirements and considerations.
- Standards, which include:
 1. Requirements: mandatory practices for internal auditing.
 2. Considerations for Implementation: common and preferred practices to consider when implementing the requirements.
 3. Examples of Evidence of Conformance: ways to demonstrate that the requirements of the Standards have been implemented.

1.3 Demonstrating Conformance

The requirements, considerations for implementation, and examples of evidence of conformance are designed to help internal auditors conform with the Standards. While conformance with the requirements is expected, internal auditors occasionally may be unable to conform with a requirement yet still achieve the intent of the standard.

The chief audit executive is responsible for documenting and conveying the rationale for the deviation and the adopted alternative actions to the appropriate parties.

Related requirements and information appear in Standard 4.1 Conformance with Global Internal Audit Standards and Domain III: Governing the Internal Audit Function together with its principles and standards.

1.4 Application in The Public Sector

While the Global Internal Audit Standards apply to all internal audit functions, internal auditors in the public sector work in a political environment under governance, organisational, and funding structures that may differ from those of the private sector. The nature of these structures and related conditions may be affected by the jurisdiction and level of government in which the internal audit function operates. Additionally, some terminology used in the public sector differs from that of the private sector. These differences may affect how internal audit functions in the public sector apply the Standards. The section “Applying the Global Internal Audit Standards in the Public Sector,” which follows Domain V: Performing Internal Audit Services, describes strategies for conformance amid the circumstances and conditions unique to internal auditing in the public sector.

1.5 Application in Small Internal Audit Teams

The internal audit function’s ability to fully conform with the Standards may be affected by its size or the size of the organisation. With limited resources, completing certain tasks may be challenging. Additionally, if the internal audit function comprises only one member, an adequate quality assurance and improvement program will require assistance from outside the internal audit function. (See also Standards 10.1 Financial Resource Management, 12.1 Internal Quality Assessment, and 12.3 Oversee and Improve Engagement Performance.)

LCCC Internal Audit Team comprise two FTE Auditors and one 0.5 Internal Audit Manager.

1.6 Addressing Non-Conformance

Currently the Internal Audit Manager is working through implementation of the recommendations and improvement plan that came out of the PEER Review. Further work will be carried out with an action plan produced against the areas highlighted in this report where Full Compliance is not already achieved. Where areas cannot be achieved there will be an explanation. However, I am confident that we achieve Domain V currently and will strive to meet further requirements if achievable.

1.7 Self-Assessment against GIAS

Please see table below for the results of the self-assessment against the Global Internal Audit Standards. An action plan to increase conformance will be brought to the attention of the June Governance and Audit Committee.

Global Internal Audit Standards		Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings	
Domain I: Purpose of Internal Auditing		Fully achieved	Fully achieved	This is an overall opinion based on relevant Domains/Principles/Standards assessments below and other assessment activities, such as stakeholder feedback.	
Domain II: Ethics and Professionalism		Fully achieved	Not required	This is an overall opinion for Domain II based on the findings from the Principles 1, 2, 3, 4 and 5 below	
Principle 1: Demonstrates Integrity	Assessment of Principle 1: Internal auditors demonstrate integrity in their work and behaviour.		Fully achieved	Not required	This is an overall opinion for Principle 1, using the results from Standards 1.1, 1.2 and 1.3 below.
	Standard 1.1	Honesty and Professional Courage	Fully achieved	Not required	
	Standard 1.2	Organization's Ethical Expectations	Fully achieved	Not required	
	Standard 1.3	Legal and Ethical Behaviour	Fully achieved	Not required	
Principle 2: Maintain Objectivity	Assessment of Principle 2: Internal auditors maintain an impartial and unbiased attitude when performing internal audit services and making decisions.		Fully achieved	Not required	This is an overall opinion for Principle 2, using the results from Standards 2.1, 2.2 and 2.3 below.
	Standard 2.1	Individual Objectivity	Fully achieved	Not required	
	Standard 2.2	Safeguarding Objectivity	Fully achieved	Not required	
	Standard 2.3	Disclosing Impairments to Objectivity	Fully achieved	Not required	
Principle 3: Demonstrate Competency	Assessment of Principle 3: Internal auditors apply the knowledge, skills, and abilities to fulfil their roles and responsibilities successfully.		Generally achieved	Not required	This is an overall opinion for Principle 3, using the results from Standards 3.1 and 3.2 below.
	Standard 3.1	Competency	Generally achieved	Not required	Internal auditors' self-assessments of their competencies and plans for professional development. No formal performance reviews carried out. However performance is discussed during and after audit reviews are carried out within team meetings.
	Standard 3.2	Continuing Professional Development	Generally achieved	Not required	Performance is monitored on an ongoing basis but no formal reviews are carried out within LCCC. As per the PEER review a formal CPD documented process will be introduced.

Global Internal Audit Standards		Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings	
Principle 4: Exercise Due Professional Care	Assessment of Principle 4: Internal auditors apply due professional care in planning and performing internal audit services.		Generally achieved	Not required	This is an overall opinion for Principle 4, using the results from Standards 4.1, 4.2 and 4.3 below.
	Standard 4.1	Conformance with the Global Internal Audit Standards	Generally achieved	Not required	NEW - Performance evaluations showing honesty and professional courage as objectives. This will need to be added to our questionnaires for the new year audit plan.
	Standard 4.2	Due Professional Care	Fully achieved	Not required	
	Standard 4.3	Professional Scepticism	Fully achieved	Not required	
Principle 5: Maintain Confidentiality	Assessment of Principle 5: Internal auditors use and protect information appropriately.		Fully achieved	Not required	This is an overall opinion for Principle 5, using the results from Standards 5.1 and 5.2 below.
	Standard 5.1	Use of Information	Fully achieved	Not required	
	Standard 5.2	Protection of Information	Fully achieved	Not required	

Global Internal Audit Standards		Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings	
Domain III: Governing the Internal Audit Function		Generally achieved	Generally achieved	This is an overall opinion for Domain II based on the findings from the Principles 6, 7 and 8 below	
Principle 6: Authorised by the Board	Assessment of Principle 6: The board establishes, approves, and supports the mandate of the internal audit function.		Generally achieved	Generally achieved	This is an overall opinion for Principle 6, using the results from Standards 6.1, 6.2 and 6.3 below.
	Standard 6.1	Internal Audit Mandate	Generally achieved	Generally achieved	Internal audit currently do not formally coordinate external assurance providers. (See also Standard 9.5 Coordination and Reliance.)
	Standard 6.2	Internal Audit Charter	Fully achieved	Fully achieved	
	Standard 6.3	Board and Senior Management Support	Fully achieved	Fully achieved	
Principle 7: Positioned Independently	Assessment of Principle 7: The board establishes and protects the internal audit function's independence and qualifications.		Fully achieved	Not required	This is an overall opinion for Principle 7, using the results from Standards 7.1 and 7.2 below.
	Standard 7.1	Organizational Independence	Fully achieved	Not required	
	Standard 7.2	Chief Audit Executive Qualifications	Fully achieved	Not required	
Principle 8: Overseen by the Board	Assessment of Principle 8: The board oversees the internal audit function to ensure the function's effectiveness		Fully achieved	Fully achieved	This is an overall opinion for Principle 8, using the results from Standards 8.1, 8.2, 8.3 and 8.4 below.
	Standard 8.1	Board Interaction	Fully achieved	Fully achieved	
	Standard 8.2	Resources	Fully achieved	Not required	
	Standards 8.3	Quality	Fully achieved	Fully achieved	
	Standard 8.4	External Quality Assessment	Fully achieved	Not required	

Global Internal Audit Standards		Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings	
Domain IV: Managing the Internal Audit Function		Generally achieved	Generally achieved	This is an overall opinion for Domain IV based on the findings from Principles 9, 10, 11 and 12 below	
Principle 9: Plan Strategically	Assessment of Principle 9: The chief audit executive plans strategically to position the internal audit function to fulfil its mandate and achieve long-term success.	Fully achieved	Fully achieved	This is an overall opinion for Principle 9, using the results from Standards 9.1, 9.2, 9.3 and 9.4 below.	
	Standard 9.1	Understanding Governance, Risk Management and Control Processes	Fully achieved	Not required	
	Standard 9.2	Internal Audit Strategy	Fully achieved	Fully achieved	
	Standard 9.3	Methodologies	Fully achieved	Not required	
	Standard 9.4	Internal Audit Plan	Generally achieved	Not required	Currently the Plan is approved by the G&A. Any Changes in year are brought to the committee via the Progress Report. Currently the changes are approved by the Chief Executive. Going forward Internal Audit will seek agreement from the Chief Executive and approval at the next G&A committee.
	Standard 9.5	Coordination and Resilience	Generally achieved	Not required	NIAO bring their audit plan to G&A however Internal Audit do not have documented agreements with other assurance providers confirming the specifications of the assurance work they will perform. We do not place reliance on other assurance providers currently.

Principle 10: Manage Resources	Assessment of Principle 10: The chief audit executive manages resources to implement the internal audit function's strategy and achieve its plan and mandate.		Not applicable	Not required	This is an overall opinion for Principle 10, using the results from Standards 10.1, 10.2 and 10.3 below.
	Standard 10.1	Financial Resource Management	Not applicable	Not required	UK Public Sector Application Note The chief audit executive may have no ability to develop resource management approaches distinct from their organisation and tailored to the needs of the internal audit function. The chief audit executive's ability to develop a strategy to obtain sufficient resources and address shortfalls may also be constrained by their organisation's legal or regulatory obligations. Under these circumstances the chief audit executive will not be expected to follow the requirements of GIAS 10.1 to 10.3 (Manage Resources) if they cannot develop approaches that achieve the objectives of those standards. Instead, a chief audit executive must set out in the Charter what alternative approaches apply to the internal audit service, and then seek to manage financial, human and IT resources within those constraints.
	Standard 10.2	Human Resource Management	Not applicable	Not required	As above
	Standard 10.3	Technological Resources	Not applicable	Not required	As above

Global Internal Audit Standards		Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings	
Principle 11: Communicate Effectively	Assessment of Principle 11: The chief audit executive guides the internal audit function to communicate effectively with its stakeholders.		Generally achieved	Not required	This is an overall opinion for Principle 11, using the results from Standards 11.1, 11.2, 11.3, 11.4 and 11.5 below.
	Standard 11.1	Building Relationships and Communicating with Stakeholders	Generally achieved	Not required	NEW - Websites or web pages, newsletters, presentations, and other outlets through which the internal audit function communicates with stakeholders in the organisation. NEW - Documentation of the internal audit function's plan for managing stakeholder relationships. These new requirements can be met with increasing our presence on our intranet/website and also updating our audit manual.
	Standard 11.2	Effective Communication	Fully achieved	Not required	
	Standard 11.3	Communicating Results	Generally achieved	Not required	UK Public Sector Application Note GIAS 11.3 (Communicating Results) references the possibility that a chief audit executive may be required to make a conclusion at the level of the organisation about the effectiveness of governance, risk management and/or control. In the UK public sector, a chief audit executive must prepare such an overall conclusion at least annually in support of wider governance reporting, mindful of any specific sector obligations or processes. This overall conclusion must encompass governance, risk management and control. We are compliant with the UK Public Sector Application Note.
	Standard 11.4	Error and Omissions	Fully achieved	Not required	
	Standard 11.5	Communicating the Acceptance of Risks	Fully achieved	Not required	

Principle 12: Enhance Quality	Assessment of Principle 12: The chief audit executive is responsible for the internal audit function’s conformance with the Global Internal Audit Standards and continuous performance improvement.		Generally achieved	Generally achieved	This is an overall opinion for Principle 12, using the results from Standards 12.1, 12.2 and 12.3 below.
	Standard 12.1	Internal Quality Assessment	Fully achieved	Fully achieved	
	Standard 12.2	Performance Measurement	Generally achieved	Generally achieved	New performance indicators will be produced for the new audit year and an action plan on improvements produced and brought to the June G&A meeting.
	Standard 12.3	Oversee and Improve Engagement Performance	Fully achieved	Not required	
Global Internal Audit Standards			Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings
Domain V: Performing Internal Audit Services			Fully achieved	Not required	This is an overall opinion for Domain V based on the findings from the Principles 13, 14 and 15 below
Principle 13: Plan Engagements Effectively	Assessment of Principle 13: Internal auditors plan each engagement using a systematic, disciplined approach.		Fully achieved	Not required	This is an overall opinion for Principle 13, using the results from Standards 13.1, 13.2, 13.3, 13.4, 13.5 and 13.6 below.
	Standard 13.1	Engagement Communication	Fully achieved	Not required	
	Standard 13.2	Engagement Risk Assessment	Fully achieved	Not required	
	Standard 13.3	Engagement Objectives and Scope	Fully achieved	Not required	
	Standard 13.4	Evaluation Criteria	Fully achieved	Not required	
	Standard 13.5	Engagement Resources	Fully achieved	Not required	
	Standard 13.6	Work Program	Fully achieved	Not required	

Principle 14: Conduct Engagement Work	Assessment of Principle 14: Internal auditors implement the engagement work program to achieve the engagement objectives.		Fully achieved	Not required	This is an overall opinion for Principle 14, using the results from Standards 14.1, 14.2, 14.3, 14.4, 14.5 and 14.6 below.
	Standard 14.1	Gathering Information for Analyses and Evaluation	Fully achieved	Not required	
	Standard 14.2	Analyses and Potential Engagement Findings	Fully achieved	Not required	
	Standard 14.3	Evaluation of Findings	Fully achieved	Not required	
	Standard 14.4	Recommendations and Action Plans	Fully achieved	Not required	
	Standard 14.5	Engagement Conclusions	Fully achieved	Not required	
	Standard 14.6	Engagement Documentation	Fully achieved	Not required	
Global Internal Audit Standards			Conformance Assessment	Performance Assessment	Notes, including reference to actions to address significant findings
Principle 15: Communicate Engagement Results and Monitor Action Plans	Assessment of Principle 15: Internal auditors communicate the engagement results to the appropriate parties and monitor management's progress toward the implementation of recommendations or action plans.		Fully achieved	Not required	This is an overall opinion for Principle 15, using the results from Standards 15.1 and 15.2 below.
	Standard 15.1	Final Engagement Communication	Fully achieved	Not required	
	Standard 15.2	Confirming the Implementation of Recommendations or Action Plans	Fully achieved	Not required	

Committee:	Governance & Audit Committee
Date:	12 th March 2026
Report from:	Internal Audit Manager

Item for:	Approval
Subject:	Proposed Internal Audit Performance Indicators

1.0	<p><u>Background and Key Issues</u> As part of Internal Audit PEER review, it was recommended that the current KPIs in place are reviewed and updated. The purpose of this report is to bring proposed performance indicators to the attention of the Governance & Audit Committee for agreement as they will impact on turnaround times for Draft and Final reports and Reporting to the Committee on a timely basis.</p> <p>Agreed recommendation is for them to be implemented in the new 2026/2027 audit year. Conforming to these performance indicators will ensure that audit reports are issued in a timely manner and where not, explanations are given as to why.</p>	
2.0	<p><u>Recommendation</u> The Governance & Audit Committee are asked to agree the new Performance Indicators for inclusion in the progress reports for 26/27 audit plan.</p>	
3.0	<p><u>Finance and Resource Implications</u></p> <p>None</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out Update of Internal Audit performance indicators.	N/A
	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out. Update of Internal Audit performance indicators.	N/A

Appendices:	Proposed Internal Audit Performance Indicators
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Performance Indicators

INTERNAL AUDIT 2026/27 PI'S FOR APPROVAL

MAUREEN LEONARD

Proposed Performance Indicators 2026/27

As part of the new Global Internal Audit Standards, performance indicators (PI's) in relation to the delivery of the overall Internal Audit Service have been developed and will be included in all quarterly progress reports to the Governance & Audit Committee. The PI's included in the table below relates to Internal Audit activity. Performance of members of the Internal Audit team and identification of training needs will continue to be monitored by the Internal Audit Manager.

Implementing these indicators should help streamline the audit process and improve the turnaround of audit reports.

No	Performance Indicator	Description	Target for 26/27	Actual
1	Pre-Audit	Agreement of TOR with HOS & Director 10 days or more prior to commencement of audit/ review.	100%	xx%
2	Working Draft Report	Percentage of working draft reports issued within 3 weeks of completion of fieldwork. (Quarterly Indicator)	90%	(xx/xx)
3	Final Report	Percentage of final reports issued within 2 weeks of agreeing draft report. (Quarterly Indicator)	100%	(xx/xx)
4	Audit Plan	Delivery 2026/27 Audit Plan (Annual Indicator)	90%	x% as at xx xxx 2026
5	Audit Recommendations	Internal Audit recommendations agreed (measured from 1 April) (Quarterly indicator)	90%	xx% (xx/xx)
6	Client Feedback	Percentage of respondents who rated the overall quality of internal audit as satisfactory or above. (Quarterly Indicator)	100%	xx% (x/x)
7	Delivery of Annual Opinion	Annual opinion /report presented to G&A by 30 June annually. (Annual Indicator)	100%	xx%
8	Audit Plan	G&A Approval of audit annual plan by 31 March annually. (Annual Indicator)	100%	xx%
9	Internal Audit Charter	G&A Approval of audit charter by 30 September annually. (Annual Indicator)	100%	xx%
10	Budget	Internal Audit work within approved budget	Reported quarterly	xx%

Committee:	Governance & Audit
Date:	12 th March 2026
Report from:	Head of Finance

Item for:	Noting
Subject:	Corporate Risk CRR 7 Financial Sustainability Deep Dive

1.0	Background and Key Issues
1.1	<p>At the June 2025 G&A Committee Meeting it was agreed that one of the Council's Corporate Risks to undergo a deep dive analysis would be CRR 7 Financial Sustainability. This report aims to:</p> <ul style="list-style-type: none"> Identify the corporate risk (CRR 7 Financial Sustainability) and explain its rating as a residual medium risk; Details the mitigation measures, including both operational and strategic level mitigations; and Conclude by confirming that the Council is actively managing and monitoring the risk through various measures, such as having appropriate governance arrangements in place, a robust estimates process, a strategic approach to capital programming and appropriate use of reserves. <p>Key Considerations impacting financial sustainability</p>
1.2	As expenditure associated with staffing is the biggest cost driver within the council, the impact of changes to this expenditure can be significant. Changes to pay include, annual pay awards, changes to pension contributions and change to National Insurance contributions.
1.3	Inflationary pressures – the council is not immune to cost increases as a result of inflation. Some of the larger risks are associated with waste contracts, utility unit prices and service contracts that would be impacted by changes to the National Living Wage.
1.4	Cost of Materials – Market forces will have an impact on cost of materials. Material prices can also increase as a result of supply cost factors increasing such as energy and fuel.
1.5	Income/Grants – There are always risks associated with income levels due to funding pressures from central government or third parties, reduction of facility usage, reduction of income from customers and implications of debts associated with rates payments.
	Corporate approach regarding overall financial sustainability
1.6	Setting of budgets – the rates setting process has changed over the last few years with assumptions, that are to be built into the figures, discussed and agreed by CMT and Members at an early stage. Workshops take place and regular reports are presented to Members to ensure there is full transparency of the figures contained within the estimates and that line by line scrutiny can take place.
1.7	Capital – due to the size of the capital programme and the aspirations for future projects, the council has agreed a smoothing approach to build the capital financing by the equivalent of 1.5% on the District Rates each year. This is to ensure the programme remains affordable with no large impact in any one year to the ratepayer. Governance arrangements have been agreed to ensure all proposals are fully scrutinised prior to being presented to Members.

1.8 Use of Reserves – each of the council’s reserves are reviewed on a regular basis and presented to Members following year end. There are a number of separate reserves that have been established for specific projects/programmes, such as CIF, DEA, Waste and R&R and others to provide financial resilience, such as the Penny Product and Election reserves. There are also a number of items earmarked within the General Fund to mitigate against negative impacts on budgets/rates, such as one off events, costs associated with legal matters over and above those budgeted for.

1.9 **Operational risk mitigations include:**

- Governance processes in place such as approval limits and CMT processes to ensure scrutiny of proposed spend.
- Capital Governance processes, including review of financial appraisals to ensure proposals are affordable and in line with relevant strategies from a financial aspect (i.e. capital strategy).
- Budgetary Control – budget meetings with each directorate regularly to assess current position, identify any opportunities that may arise, identify risks and mitigation proposals against these risks.
- Management Accounts are presented to Members on a regular basis to advise the current financial position and key areas of movement, along with risks and opportunities highlighted.
- The Accounting Manual was fully redesigned in 2024 and has been further amended following procurement changes in November 2025. This provides the governance processes for all financial aspects, such as procurement, treasury, income, debtors, creditors, banking matters etc.

1.10 **Strategic risk mitigations include:**

- Medium Term Strategy – as part of the estimates process, a suite of strategies is compiled and agreed that provides assurance for the medium term. These strategies include, capital, treasury and investment, MRP policy and the Prudential Indicators. Outturn reports regarding the relevant indicators are presented to Members on a quarterly basis.
- Use of reserves – As detailed above in 1.8, the council has a prudent approach to using reserves to ensure risks are mitigated. As part of the estimates process, the CFO has to be content that reserves are at an adequate level.
- Estimates process – there is a focus on both efficiency and being able to deliver outcomes in line with the Corporate Plan.
- Focus on maximisation of alternative funding sources – there will always be risks associated with funding from third parties, especially given the ongoing financial pressures on central government departments. Teams within the council continue to identify potential funding opportunities.
- There is regular communication through both the Association of Local Government Finance Officers group and SOLACE to identify any financial pressures that may impact local government.

1.11	<p>Conclusion</p> <p>The Council is actively managing the risk of financial sustainability through a number of measures, including strong governance arrangements, robust processes for estimates and budgetary control and ensuring an adequate level of reserves is in place.</p>	
2.0	<p><u>Recommendation</u></p> <p>It is recommended that Members note the update and mitigation measures in place regarding financial sustainability.</p>	
3.0	<p><u>Finance and Resource Implications</u></p> <p>Not Applicable.</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	<p>Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out</p> <p>Not required – Deep Dive of Corporate Risk.</p>	
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	<p>Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.</p> <p>Not required – Deep Dive of Corporate Risk.</p>	

Appendices:	Appendix I - Deep Dive Presentation
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CORPORATE RISK

CRR 7 Financial Sustainability Deep Dive

March 2026

CRR 7 – FINANCIAL SUSTAINABILITY

Risk – Failure to deliver balanced budget and longer term financial resilience and sustainability

Inherent Risk Score	16
Residual Risk Score	9

KEY CONSIDERATIONS

Root Causes	
Pay Costs	Biggest cost driver of council. Pay awards unknown for future years.
Inflationary pressures	Waste, Utilities, Contracts linked to NLW
Cost of materials	External market forces and supply issues– e.g. energy/fuel/materials
Income/Grants	Risk of Negative Penny Product Central Government pressures Reduction of footfall in facilities

APPROACH

- Reserves position presented to committee after year end accounts approved.
- Numerous earmarked reserves: Penny Product, Waste, CIF, DEA, R&R, Election
- Earmarked items within the general fund to mitigate impact on budgets – legal fees
- Resilience paper at the end of each year – use of potential underspends.
- Approach to capital – 1.5% on rates each year to fund future capital aspirations
- Capital programme board – scrutinise proposals – within affordability limits
- Budget focus – agreed assumptions up front.

OPERATIONAL LEVEL RISK MITIGATIONS

- Governance Arrangements e.g Approval limits / CMT processes
- Financial Appraisals (Revenue and Capital) – focus on need and affordability
- Management Accounts (every 2 months at present) – include risks and opportunities that may materialise
- Accounting Manual (amended November 2025)
- Regular budget meetings with each Directorate

STRATEGIC LEVEL RISK MITIGATIONS

- Medium Term Financial Strategy
- Prudent approach to use of Reserves
- Estimates Process – dual focus on Efficiency and Outcomes
- Focus on maximisation of alternative funding sources
- Links through ALGFO/SOLACE etc. on financial pressures

CONCLUSION

CONCLUSION

The Council is actively managing the risk of financial sustainability through both operational and strategic mitigation measures.

A strong budget management scrutiny process is in place. This, along with regular reviews of both specific and earmarked reserves has enabled the Council to be in a strong financial position and provides financial resilience for risks that may arise.

Committee:	Governance & Audit Committee
Date:	12 March 2026
Report from:	Richard Harvey, Head of Environmental Health, Risk and Emergency Planning

Item for:	Noting
Subject:	Corporate Risk CRR 011 Burial Grounds Deep Dive

1.0	<u>Background and Key Issues</u>
1.1	The purpose of this report is for Members to consider the deep dive of CRR 011 – Burial Grounds. The deep dive is part of the Council’s Risk Management process with 2 corporate risks subject to scrutiny per annum.
1.2	This report highlights the key issues of the deep dive and is supported by a presentation that will be delivered as part of the reporting process.
1.3	At the June 2025 G&A Committee Meeting it was agreed that one of the Councils Corporate Risks to undergo a deep dive analysis would be CRR 011 Burial Grounds. This report aims to: <ul style="list-style-type: none"> <input type="checkbox"/> Identify the corporate risk (CRR 011 Burial Grounds) and explain its rating as a residual medium risk due to limited burial space availability (section 1.4). <input type="checkbox"/> Details the mitigation measures, including short-term capacity projects, medium-term planning and long-term strategies (Sections 1.5–1.11). <input type="checkbox"/> Conclude by confirming that the Council is actively managing and monitoring the risk through phased expansion, strategic planning, and governance oversight (Section 1.12).
1.4	Lisburn & Castlereagh City Council currently manages ten cemeteries, nine of which remain open for burials. However, only Lisburn New Cemetery Extension offers new plots for sale, and these are only available at the time of death. This limited availability presented a significant risk of insufficient burial space in the short and medium term and is reflected on the Councils Corporate Risk Register as a residual medium risk.
1.5	Strategic Response A Cemetery Strategy was developed and consulted on publicly in early 2022. It identified an immediate short-term need for burial space and laid the groundwork for phased expansion projects.
1.6	Short-Term Capacity Measures Phase 1a – Blaris Extension. <ul style="list-style-type: none"> <input type="checkbox"/> Complete. <input type="checkbox"/> Construction began in February 2023. <input type="checkbox"/> Delivered 240 new burial plots at Lisburn New Cemetery Extension.
1.7	Phase 1b – Utilisation of land within existing Lisburn New Cemetery footprint (Appendix I) <ul style="list-style-type: none"> <input type="checkbox"/> Tender bids received within budget. <input type="checkbox"/> Expected to deliver 565 additional plots. <input type="checkbox"/> Mobilisation of works underway. <input type="checkbox"/> Once developed, this will extend capacity to approximately 4.0 years.

<p>1.8</p>	<p>Medium-Term Planning</p> <p>Garden of Remembrance – Phase 1c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Revised scope based on site visits and demand analysis. <input type="checkbox"/> Planning permission being sought for: <input type="checkbox"/> Single plots for up to 12 ashes. <input type="checkbox"/> Vaults for single ashes. <input type="checkbox"/> Single-depth double plots. <input type="checkbox"/> Scattering gardens. <input type="checkbox"/> Estimated timeline: 18 months, subject to statutory approvals. 	
<p>1.9</p>	<p>Long-Term Provision</p> <p>Expression of Interest Process</p> <ul style="list-style-type: none"> <input type="checkbox"/> Initial EOI withdrawn. <input type="checkbox"/> Second EOI includes further exploration of contingency lands in the short term. <input type="checkbox"/> Report regarding second EOI tabled at R&G 6th Nov with view to progressing to external market. <input type="checkbox"/> Concluded 31 January 2026 and outworkings being progressed through Assets. 	
<p>1.10</p>	<p>Financial Planning</p> <ul style="list-style-type: none"> <input type="checkbox"/> Capital Programme Budget <input type="checkbox"/> Initial project budget <input type="checkbox"/> Working Programme Budget 	
<p>1.11</p>	<p>Equality and Rural Needs</p> <ul style="list-style-type: none"> <input type="checkbox"/> Equality and Good Relations Screening completed. <input type="checkbox"/> Rural Needs Impact Assessment completed. 	
<p>1.12</p>	<p>Conclusion</p> <p>The Council is actively managing the risk of insufficient burial ground capacity through bi-monthly meetings of the Cemetery Project and Programme Board including a phased expansion strategy. This includes the development of new plots within the existing cemetery, and the strategic land acquisition and long-term planning. These efforts are supported by robust financial planning and statutory assessments to ensure sustainable and equitable cemetery provision.</p>	
<p>2.0</p>	<p><u>Recommendation</u></p> <p>It is recommended that Members note the update and mitigation measures in place regarding the cemeteries provision risk.</p>	
<p>3.0</p>	<p><u>Finance and Resource Implications</u></p> <p>Not Applicable.</p>	
<p>4.0</p>	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
<p>4.1</p>	<p>Has an equality and good relations screening been carried out?</p>	<p>No</p>
<p>4.2</p>	<p>Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out</p> <p>Not required – Deep Dive of Corporate Risk.</p>	

4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions or rationale why the screening was not carried out. Not required – Deep Dive of Corporate Risk.	

Appendices:	Appendix I - Deep Dive Presentation
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Corporate Risk

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CRR 11 Burial Grounds Deep Dive

15 January
2026

CRR 1 – Serious Injury

Risk – Insufficient LCCC Burial Ground capacity within the Council area.

Inherent Risk Score

12

Residual Risk Score

9

Background

Background

- LCCC has 10 Cemeteries.
- 9 remain open for burials.
- Only Lisburn New Cemetery Extension for new plots.
- Approximate burial need is 144 plots per year.
- Limited capacity presents a significant risk of insufficient burial space.
- Escalated to Corporate Risk Register.

Corporate Approach

Corporate Approach

- Development of Cemetery Strategy 2022.
- Identified Short, Medium and Long-term Objectives.
- Establishment of a Cemetery Board to oversee the progression of objectives.
- Development of a Capital Programme.

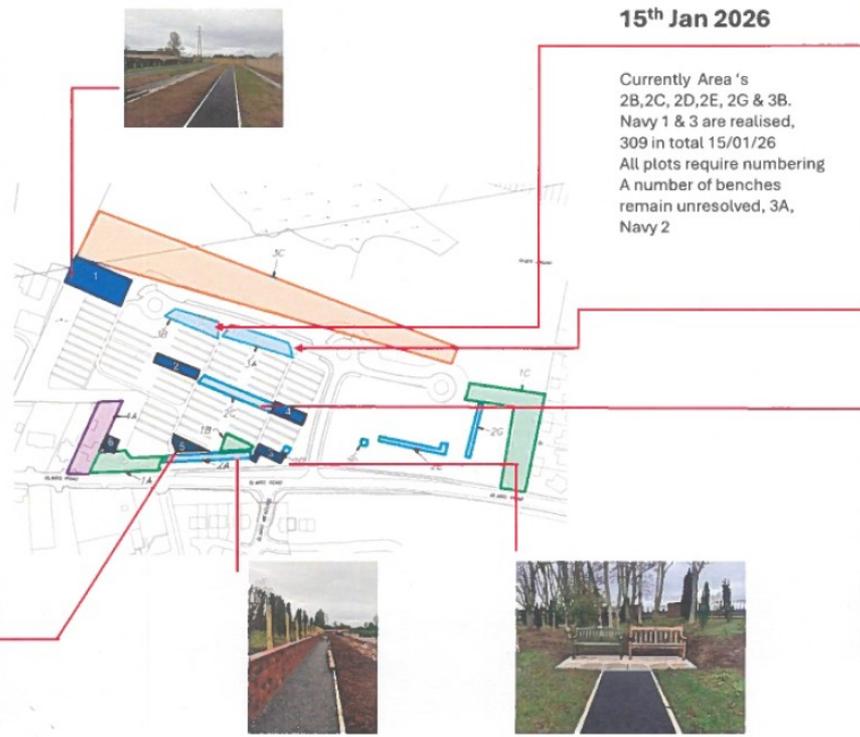
Risk Mitigations

Short and Medium Objectives

- Phase 1(A) - Completed 2023/2024 - delivered 240 new plots.
- Phase 1(B) - KPI release of 400 plots by end of Quarter 4.
- On target - Quarter 3 - 309 plots.
- Total number of graves developed - 565+/4 years capacity.

Map

area	dwg	actual
2A	110	
2B	8	15
2C	39	38
2D	2	2
2E	22	22
2G	15	15
3A	107	
3B	58	58
Contract	361	
Navy 1	144	144
Navy 2	22	
Navy 3	15	15
Navy 4	20	
Navy 5	8	
Navy 6	12	
Approx	582+	4yrs @144pa



15th Jan 2026

Currently Area 's
2B,2C, 2D,2E, 2G & 3B.
Navy 1 & 3 are realised,
309 in total 15/01/26
All plots require numbering
A number of benches
remain unresolved, 3A,
Navy 2



2C In use. Ref: N & P

Phase 1(C)

- Development of alternative options to celebrate the passing of a loved one.
- More sustainable options.
- Single depth plots.
- Vaults for single ash disposal.
- Scattering garden.
- Subject to normal regulatory/statutory processes.
- 18 months development timeline.

Longterm Objectives

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- Securing additional land to meet future provision.
- 10-15 Acres – 20 years capacity.
- LPS indication of land value – revised Capital Programme.
- EOI Process:
 - Initial EOI withdrawn.
 - Second EOI undertaken.
 - Approval to progress through Regeneration & Growth on 6 November 2025.
 - Concluded 31 January 2026 and outworkings being progressed through Assets.
- Engagement for the exploration of contingency land.
- Additional capacity in non-Council owned burial ground including Religious Establishments and third-party providers.

Conclusion

Conclusion

- The Council is actively managing the risk of insufficient burial capacity.
- Bi-monthly Cemetery Programme Board Meeting.
- Development of 565 plots/4 years capacity.
- EOI process for strategic land acquisition.
- Contingency land.