Agenda Item No: 7

Meeting of:	**Governance and Audit Committee**
Date of Meeting:	**Monday, 28 September 2026**
Relevant Scrutiny Committee:	**No Relevant Scrutiny Committee**
Urgent Decision Procedure Used (If yes, why)	N/A
Item Type	Part I
Report Title:	Q1 2026/27 Progress Against External Regulatory Recommendations.
Portfolio Holder:	Executive Leader and Cabinet Member for Performance and Resources
Strategic Leadership Team:	Director of Corporate Resources
Lead Officer:	Tom Bowring, Director of Corporate Resources

1.0 What is this report about?

1.1 The report (and Strategic Insight Board (SIB) Insight Tracker appended to this report) outlines progress at Q1 2026/27 against all our existing external regulatory recommendations.

1.2 Overall, performance is strong, with 87.5% of actions (21) attributed a Green performance and the remaining 12.5% (3) an Amber status. No actions are rated Red, providing assurance that regulatory actions and associated risks are being effectively managed.

1.3 During Quarter 1, 5 regulatory actions were completed, including 1 National Regulatory Action relating to Local Government Services to Rural Communities and 4 Local Regulatory Actions. Three completed local regulatory actions relate to the Panel Performance Assessment recommendations (PPA) and one to the Audit Wales Digital Strategy Review.

1.4 The Q1 position has been and considered by the Strategic Leadership Team, and is being presented to Governance Audit Committee, ahead of Cabinet, to support ongoing oversight and assurance. Any comments from Governance and Audit Committee and Cabinet will be considered by the Strategic Insight Board as part of ongoing monitoring and oversight arrangements.

2.0 What are the Recommendations?

	Recommendations – What and How?	Reason for Recommendation – Why?
2.1	That Governance and Audit Committee review progress in addressing external regulatory recommendations as detailed in	To ensure the Council addresses its regulatory recommendations and responds appropriately to the recommendations identified through the Audit Wales'

	Recommendations – What and How?	Reason for Recommendation – Why?
	the appended Strategic Insight Board Insight Tracker for the period Q1 2026/27.	programme of local reviews national Local Government Studies, Estyn and the Panel Performance Assessment.
2.2	That Governance and Audit Committee refer any views and recommendations to Cabinet including endorsement of the removal of completed actions from the Insight Tracker.	To ensure that the Council's Strategic Insight Board Insight Tracker reflects the Council's most up to date position on its regulatory recommendations.

3.0 What is the background to this report?

3.1 As part of the on-going audit work by the Council's regulators, a series of recommendations are made as a result of audit studies (locally and nationally). The Council is required to ensure that these improvement areas are appropriately progressed, and the results reported. This supports compliance with statutory performance and governance requirements.

3.2 The SIB Insight Tracker contains the most up to date record of all our regulatory recommendations and outlines progress to date against these. The tracker is updated throughout the year to reflect ongoing audit activity and ensure actions are progressed and closed in a timely manner.

4.0 To improve accessibility and reporting, the tracker is now being presented through a new Power Bi Strategic Insight Board Tracker . The new dashboard provides members with an overview of overall progress, Directorate performance, completed actions and emerging issues requiring attention. This supports ongoing monitoring and compliance in line with the Council's governance arrangements. The tracker will continue to be refined throughout the year in response to feedback from officers and elected Members to ensure it meets reporting needs.

4.1 This approach ensures progress remains under review enabling us to provide our regulators with an up-to-date position on all related work in line with our statutory duties.

4.2 The Governance and Audit Committee has a key role in maintaining oversight of the Council's response to issues raised by our external regulators and receiving progress updates against all regulatory recommendations when initially received, and via quarterly update reports.

5.0 What issues are there to be considered?

5.1 The SIB Insight Tracker: Q1, 2026/27 outlines our progress against all existing regulatory recommendations in response to local reviews, national Local Government Studies and audit work undertaken to date as summarised above (S1.2 - S1.3)

5.2 Overall, Quarter 1 performance highlights strong progress in addressing regulatory recommendations, with no actions attributed a Red performance status. This provides assurance that improvement actions are progressing and associated risks are being effectively managed across the Council.

5.3 During Q1 2026/27, 5 actions were completed, 1 National Regulatory Action relating to Local Government Services to Rural Communities and 4 Local Regulatory Actions, 3 relating to Panel Performance Assessment and 1 relating to Digital Strategy Review.

5.4 PPA recommendations 1, 2 and 4 from the Insight Tracker are reported as completed because the original actions arising from the Panel Performance Assessment have been delivered by the original planned completion date of March 2026. The Council has embedded the required changes through initiatives such as Vale 2030 communications, improved performance reporting and governance arrangements. While related activity will continue as part of normal business improvement and service development, the specific regulatory recommendations have been substantially addressed and no longer require monitoring through the Insight Tracker. The closure of these PPA actions is being highlighted to Governance and Audit Committee for transparency and assurance as part of reporting the Q1 SIB tracker with approval being sought for removal in line with the committee and Cabinet's remits.

5.5 Regulatory recommendations continue to be incorporated into the SIB Regulatory Tracker as they are identified, and the Strategic Insight Board responds to recommendations from Cabinet and Governance and Audit Committee as part of their quarterly consideration of the tracker. The tracker is subject to quarterly monitoring by the Strategic Leadership Team with regular reporting to Governance and Audit Committee and Cabinet to ensure robust oversight, while ongoing engagement with Audit Wales throughout the year provides external challenge and validation.

5.6 Regulatory actions within the SIB tracker are prioritised as High, Medium or Low based on the level of risk they pose to the Council, including legal, financial, service delivery and reputational risks. High priority actions require immediate response (within 1 year), medium within 1–2 years, and low within 1–3 years.

5.7 Progress continues to be strongest in the Council's highest-risk regulatory recommendations. Of the 12 high-priority actions, 11 are Green and 1 is Amber. In relation to medium rated priority actions (6) have been attributed a Green performance status reflecting timely progress in delivery and only (2) an Amber status. All low-priority actions are Green. This demonstrates that improvement activity is focused on the areas of greatest risk while maintaining good progress across all categories.

5.8 Overall, good progress has been made with no Red rated actions at Quarter 1. Whilst initial response to recommendations have been addressed, many actions are long-term in nature and work will remain ongoing in a business-as-usual capacity to further embed the required changes in response to audit recommendations. This approach ensures compliance with regulatory expectations.

5.9 In addition to Quarter 1 performance, at Quarter 4 2025/26, Members of Governance and Audit Committee sought assurance regarding the number of requests to revise target completion dates associated with regulatory recommendations. The Council has reviewed its reporting approach and will continue to monitor delivery against approved target dates, recognising that where a revised timescale has been agreed, this becomes the new baseline for performance monitoring. This ensures accountability for delivery is maintained while providing a clearer picture of current performance and progress against agreed milestones. Future quarterly reporting will focus on requests for timescale revisions made during the reporting period, with annual reporting highlighting any significant trends, recurring delivery challenges or lessons learned. No requests to revise target completion dates were received during Quarter 1 2026/27, indicating that actions remain on track against agreed delivery timescales.

5.10 Additionally, Committee members sought clarification regarding the timing of quarterly regulatory action reporting, through the following recommendation:

5.11 'T H A T the Director of Corporate Resources considers providing future iterations of the Quarter position earlier to the Governance and Audit Committee.'

5.12 In response to the Committee's recommendation, the reporting timetable has been reviewed. Quarterly Performance, Corporate Risk, and the Regulatory Tracker updates are collected and reported through a single process to minimise duplication and reduce the burden on directorate colleagues. This approach also enables information collected once to be used for multiple reporting purposes and audiences.

5.13 The timescales required for data collection, quality assurance, and governance sign-off mean that there is an unavoidable period between the end of a reporting quarter and formal consideration by Members. For example, Q1 2026/27 information was requested from services between 15th June and 24th July 2026, followed by a period of quality assurance, analysis, report drafting and review with Directors and the Strategic Leadership Team. Due to the August Member recess, the next available Governance and Audit Committee meeting was scheduled for 21st September 2026 and has subsequently been rescheduled to 28th September 2026. Similarly, for Q2 2026/27, the information collection period runs from 14th September to 16th October 2026. This is followed by quality assurance, report preparation, and Director and Strategic Leadership Team sign-off. Whilst opportunities to report earlier have been considered, there are no Governance and Audit Committee meetings scheduled during November 2026. Consequently, the Committee meeting on 14th December 2026 represents the earliest available opportunity to report the Quarter 2 position.

5.14 The 2026/27 timetable for reporting the Regulatory Tracker therefore reflects the earliest practicable reporting dates within the current annual performance calendar and Governance and Audit Committee meeting schedule, whilst maintaining robust quality assurance arrangements and a coordinated approach to performance, risk, and regulatory reporting.

6.0 How has evidence been used to inform the report, including the views of others?

6.1 The Owners of Regulatory Recommendations provide comprehensive updates each quarter on the progress made for each recommendation. Updates are informed by work undertaken, performance data, stakeholder engagement and professional judgement, providing an evidence-based assessment of progress.

6.2 This information is subject to ongoing challenge and review through the Council's performance management arrangements, including oversight by the Strategic Leadership Team. This ensures that reported progress is evidence-based, proportionate and reflects an accurate assessment of delivery.

7.0 What are the next steps if the recommendations are approved?

7.1 Any comments or recommendations from Governance and Audit Committee will be referred to relevant action owners to inform future updates and strengthen delivery. The report, together with Committee views, will be referred to Cabinet for further consideration.

7.2 The Strategic Insight Board will review all feedback arising from Governance and Audit Committee and Cabinet to ensure that it is appropriately considered, responded to and reflected within ongoing monitoring and oversight arrangements. This will support continued improvement and reinforce accountability for delivery of regulatory actions.

8.0 How does this report support Vale 2030 and Reshaping?

8.1 This report supports the delivery of Vale 2030 by demonstrating how the Council is responding to external regulatory recommendations to strengthen performance, governance and service delivery. Progress against these recommendations contributes directly to the achievement of the Council's Well-being Objectives and associated commitments within the Corporate Plan.

8.2 The Strategic Insight Board Regulatory Tracker ensures that regulatory actions are embedded within directorate and corporate planning arrangements, aligning improvement activity with the Council's priorities and enabling delivery to be monitored through the Annual Performance Calendar. This provides a clear line of sight between regulatory findings, improvement actions and outcomes for residents.

8.3 By maintaining oversight of regulatory recommendations and ensuring progress is tracked and reported, the Council is supporting continuous improvement and reshaping services in line with Vale 2030, ensuring they remain sustainable, responsive and focused on delivering long-term benefits for communities.

9.0 How does this demonstrate the Five Ways of Working?

9.1 External regulation remains a key driver of continuous improvement across the Council. Progressing the improvement areas identified by regulators demonstrates a structured and evidence-based approach to strengthening services and governance arrangements.

9.2 The Council's response to regulatory recommendations reflects the Five Ways of Working by focusing on long-term, sustainable improvement, integrating actions within directorate and corporate planning, and promoting collaboration across services and with external partners. Involvement and engagement inform delivery, while a preventative approach is evident in actions designed to address root causes and mitigate future risk.

9.3 All recommendations are monitored through the Strategic Insight Board Regulatory Tracker, ensuring ongoing oversight, accountability and alignment with the Council's well-being objectives and national well-being goals.

Resources

10.0 Finance

10.1 There are no additional budgetary implications directly arising from this report, although failure to progress the improvement areas outlined in the report could have a negative impact on any future external regulatory assessments of the Council which could in turn put funding opportunities at risk.

11.0 Workforce

11.1 There are no direct workforce related implications associated with this report. However, there are a number of issues contained within the report that if not effectively managed have the potential to impact on our staff establishment and performance overall. This may in turn impact adversely on progressing our improvement areas and achievement of our well-being Objectives.

12.0 <u>Legal and Equalities</u>

12.1 **Does an Equalities Impact Assessment need to be completed? If not, why?**
An Equalities Impact Assessment has not been completed as there are no implications directly arising from this report. Where relevant lead officers or action owners will have considered equality implications as part of their response to addressing the recommendation.

13.0 <u>Key Contacts</u>

12.1 **Who are the primary officers to contact with any comments and/or queries on the report?**

Lead Officer: Tom Bowring, Director of Corporate Resources, TBowring@valeofglamorgan.gov.uk 01446 709247	Democratic Services Officer: Gareth Davies, Democratic and Scrutiny Services Officer gjdavies@valeofglamorgan.gov.uk 01446 709249

<u>Appendix</u>
None

<u>Background Documents</u>

None