Appendix B



Newark and Sherwood District Council

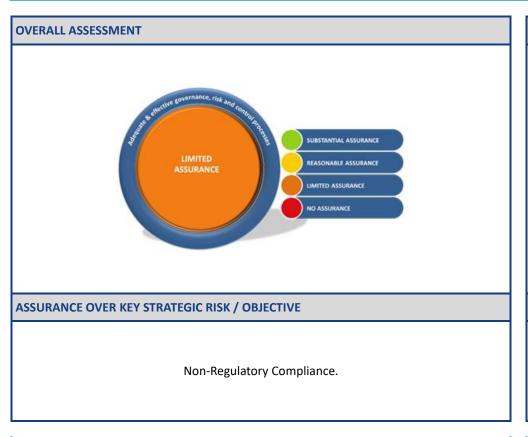
Assurance Review of Equality, Diversity and Inclusion

May 2025

Final



Executive Summary



KEY STRATEGIC FINDINGS



The systems of internal controls relating to Equality Diversity and Inclusion (EDI) are generally inadequate or not operating effectively, and significant improvements are required to ensure that risks are managed and process objectives achieved.



The Equality Group is not meeting, and associated evidence of action plans, ongoing assurance and implementation is not available.



Regulatory Compliance has not been formally assessed.



The Equality and Diversity Strategy requires updating and an overarching policy/procedure relating to EDI needs to be formulated/developed.

GOOD PRACTICE IDENTIFIED



The Council holds the accreditation for Disability Confident and Thrive at Work, and the Armed Forces Covenant (Gold Status).

SCOPE

The review provided assurance on the adequacy and effectiveness of the processes in place to ensure that staff work in an environment where they feel they belong, are treated equitably and without discrimination. This also provided assurance on the compliance with policies, procedures, and relevant legislation.

ACTION POINTS

Urgent	Important	Routine	Operational
1	3	3	2



Assurance - Key Findings and Management Action Plan (MAP)

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	The Human Resource Business Manager (HR & Training) confirmed that there was previously an Equality Group in place which has not recommenced since the Covid Pandemic. Consideration is currently being given to enlisting the help of the East Midlands Council to support restarting the Equality Group.	and for the Terms of Reference for the	1	It is intended to reform the Equality Group by the 01 July 25, with new terms of reference and support from the EMC.	01/07/25	EEDI Lead
2	Directed	The Equality and Diversity Strategy was obtained and reviewed. It was noted that the Strategy related to the period 2021-2023. (2012-16 and 2016-20 were available from the internet) The Director of Housing, Health and Wellbeing and Business Manager (HR & Training) confirmed that the Strategy has not been reviewed/updated.	be updated including the equality objectives adopted in 2016. As per the Equality Act 2010 and the Public Sector Equality Duty, "A local authority is	2	A full review of the EEDI Strategy and all internal/external policies is to be undertaken imminently. The revised strategy/policies are to be complete and published this calendar year.	31/12/25	EEDI Lead
3	Delivery	The Human Resource Business Manager (HR & Training) confirmed that there are no specific KPIs that have been formulated/developed relating to EDI. However, there are some KPIs relating to Gender Pay Gaps. In addition, as part of the staff survey, aspects relating to EDI were included (See Findings Section).	developed. Non-achievement of a KPIs/Financial Target to be investigated and appropriate remedial action to be	2	We have KPI's — a full review of their ongoing suitability is underway which will involve exploring additional PIs that can add value.	10/06/25	EEDI Lead



Fundamental control issue on which action should be taken immediately.



Control issue on which action should be taken at the earliest opportunity.

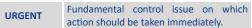


Control issue on which action should be



Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
4	Delivery	 The Human Resource Business Manager (HR & Training) confirmed that a discussion paper relating to the future of EDI was presented to the Senior Leadership Team on 26th July 2024. The report was obtained and reviewed. It was noted that some of the actions that formed part of the report have not been actioned such as: Conversations being held through team meetings relating to Equality Diversity and Inclusion. Training relating to Equality Diversity and Inclusion. Commencement of the Equality Group. The Director of Housing, Health and Wellbeing confirmed that these had not been actioned as the Council has yet to establish its Regulatory Compliance. Training relating to Equality Biversity and Inclusion. Commencement of the Equality Group. 	regulatory compliance to be conducted and an appropriate action plan formulated/developed including timelines for when already identified actions will be implemented.		An internal self-assessment will be completed using the LGA framework. Additionally, a full review to ensure compliance with all housing related regulatory guidelines.		EEDI Lead







Control issue on which action should be taken at the earliest opportunity.



Control issue on which action should be



Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
5	Directed	The Director of Housing, Health and Wellbeing and Business Manager (HR & Training) confirmed that though Equality Diversity and Inclusion (EDI) is referred to in several policies, such as Disability leave policy and Dignity at work Policy and Procedure, there was no overarching policy relating to EDI. An EDI (Equality, Diversity, and Inclusion) Policy is not legally required for a District Council, however under the Equality Act 2010, public bodies (including councils) have a duty to eliminate discrimination, advance equality, and foster good relations. Having a policy helps both support and demonstrate the public discharge of this duty, in addition to the Public Sector Equality Duty (PSED) whereby Councils must consider equality impacts in decision-making, policies, and service delivery. Most District Councils do have an EDI Policy as part of their governance and operational framework			As above.	31/12/25	EEDI Lead
6	Directed	The Business Manager (HR & Training) confirmed that no risks relating to EDI have been identified as part of the departmental Operational Risk Register or the Corporate risk register.	corresponding mitigation outlined		EEDI Steer group will review the risks relating with EEDI following a full selfassessment.	31/12/25	EEDI Lead
7	Directed	The Director of Housing, Health and Wellbeing confirmed that there is information available relating to EDI on the Council Website, but it is out of date.		3	A full review of the council's website and intranet is due to commence in June 2025.	01/08/25	EEDI Lead



Fundamental control issue on which action should be taken immediately.



Control issue on which action should be taken at the earliest opportunity.



Control issue on which action should be



Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments
1	Directed	data relating to EDI; however, not all staff	information being completed highlighted to staff.	,
2	Directed	The Director of Housing, Health and Wellbeing confirmed that though roles and responsibilities relating to EDI had been outlined, there was no-one overall responsible for EDI and therefore a number of the elements were uncoordinated at present. This has largely been due to lack of resources. Having a Board Member or senior officer dedicated to equality can enhance accountability and ensure that the Council remains focused on its equality obligations. It also allows for clear reporting and progress updates.		An EEDI lead has been allocated, and they will lead a steering group that includes two members of the senior leadership team as sponsors.

ADVISORY NOTE

Operational Effectiveness Matters need to be considered as part of management review of procedures.



Findings



Directed Risk:

Failure to properly direct the service to ensure compliance with the requirements of the organisation.

Ref	Expected Key Risk Mitigation		Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
GF	Governance Framework	There is a documented process instruction which accords with the relevant regulatory guidance, Financial Instructions and Scheme of Delegation.	Partially in place	1, 2 & 5	1 & 2
RM	Risk Mitigation	The documented process aligns with the mitigating arrangements set out in the corporate risk register.	Partially in place	6	-
С	Compliance	Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	Partially in place	7	-

Other Findings



According to the Equality Act 2010, Councils have a Statutory requirement to uphold the "Public Sector Equality Duty". As per the Equality Act the key points about the statutory requirements for the Council regarding EDI are as follows:

- Protected Characteristics The Equality Act outlines a list of protected characteristics that the Council must consider when applying the Public Sector Equality Duty.
- Key Duties- The Council must actively work to eliminate discrimination, advance equality of opportunity and foster good relationships.
- Impact Assessments Councils should conduct Impact Assessments when developing new policies or initiatives to assess how they might affect different groups.
- Publishing Information Councils are required to publish information demonstrating their compliance with the equality duty including equality objectives and how different groups are affected by their services.
- Monitoring and review Councils should regularly monitor their progress on equality and diversity and review policies and practices.



Other Findings



The Equality Framework for Local Government (EFLG) 2021 was updated to reflect the latest legislation affecting equality such as Gender Pay Gap reporting, the changing context of the local government sector and equality in Britain as well as in response to other significant issues that might affect equality including the UK's decision to leave the European Union, the increased focus on race equality as a result of the Black Lives Matter movement and the health inequities highlighted by the Coronavirus pandemic.

The equality framework is intended to help councils:

- Deliver accessible, inclusive and responsive services to customers and residents in their communities, including those from under- represented groups.
- Employ a workforce that reflects the diversity of the area they are serving.
- Provide equality of opportunity for all staff.
- Meet the requirements of the Public Sector Equality Duty and support any aspirations to exceed these.

It does this by:

- Identifying the areas of activity that councils need to address to deliver good equality outcomes.
- Helping councils to understand how they can build equality into processes and practices.
- Supporting organisations to become inclusive employers.
- Enabling councils to informally self-assess their progress on the equality improvement journey and determine where and how they need to improve.

The Framework set out four modules of improvements as below:

- Understanding and working with your communities.
- Leadership, partnership and organisational commitment.
- Responsive services and customer care.
- Diverse and engaged workforce.

In addition, it has three levels of achievement, namely:

- 'Developing' An organisation at the developing level has made an organisational commitment to improving equality. It is putting in place processes to deliver on equality issues and is working towards meeting or is meeting the statutory requirements.
- 'Achieving' An organisation at the achieving level has policies, processes and procedures in place and is delivering some good equality outcomes. It is not only meeting but can demonstrate exceeding statutory requirements.
- 'Excellent'. An organisation at the excellent level has mainstreamed equality throughout the organisation and can demonstrate that it is delivering significant outcomes across its services that are making a difference in its communities. The organisation not only exceeds statutory requirements but is an exemplar council for equality and diversity in the local government and wider public sector.

The Director of Housing, Health and Wellbeing confirmed that the Regulatory Compliance is possibly being met, though it is quite uncoordinated at present.



Other Findings



The Equality and Diversity Strategy was obtained and reviewed. The following was noted:

- The Strategy does refer to the Equality Act 2010 and the Equalities Framework for Local Government (published in September 2015), however it does not refer to the Equality Framework for Local Government (EFLG) 2021.
- Identifies Roles and Responsibilities relating to Equality and Diversity.
- In 2016 the Council adopted four Equality Objectives.

Objective 1: In delivering the Council's priorities and themes we will have due regard to equalities implications through leadership, partnership and organisational commitment.

Objective 2: To improve our services by better understanding our communities through the collection and analysis of information and engaging with partners to share as appropriate.

Objective 3: To ensure services are accessible to meet the needs of our citizens.

Objective 4: As an employer, promote an inclusive working environment to maintain and develop a modern and diverse workforce.



Discussion with the Human Resource Business Manager (HR & Training) confirmed that the roles and responsibilities relating to EDI are split. In relation to customers, the day-to-day responsibility would be the Human Resource Business Manager (HR & Training) and in relation to Tenants than the day- to- day responsibility is with the Director Housing Health and Wellbeing and Assistant Director Legal & Democratic Services.

According to the Equality and Diversity Strategy the Chief Executive, Deputy Chief Executive, Directors and Business Managers will have responsibility for ensuring that:

- The Equality & Diversity Strategy is implemented and embedded at all levels within the organisation.
- Due regard is given to our equality objectives, and they are included in Business Plans and service reviews where appropriate and relevant.
- Equality Impact Assessments (EQIAs) are completed (where appropriate) in a timely manner and equality implications are set out within reports (e.g. Committee/Council/SLT reports) to ensure that decision makers are fully informed.
- All employees are trained appropriately to raise and update their awareness of equality and diversity issues, thus enabling them to tailor services to the needs of all their customers.
- Regular monitoring and evaluation of services is provided to customers.
- Information and publicity materials aimed at the public are clear and understandable, non-offensive in their use of language and images and available in other formats and whenever appropriate in other languages, including British Sign Language.
- All contractors and organisations providing services on behalf of the Council have equality policies covering both service delivery and employment.
- As far as is reasonably practicable that the Council's public buildings are accessible to disabled people.



Discussion with The Director of Housing, Health and Wellbeing confirmed that Equality Impact Risk Assessments are conducted to assess the impact of a change to services or policy on people with protected characteristics and to demonstrate that the Council has considered the aims of the Public Sector Equality Duty.

The Equality Impact Risk Assessments relating to the Allocation Schemes (Allocation of NSDC properties and the administration of the housing register) was obtained and reviewed). The following was noted:

- The potential impact of the policy had been identified including if there is any positive or negative impact on the protected characteristics.
- Where they were negative impacts on the protected characteristics, details including consideration of the equality duty, and proposals for how they could be mitigated were noted.
- Impacts e.g. socio-economic or environmental were identified/noted.
- Summary of consultation feedback and further amendments to proposal / mitigation were highlighted. No issues relating to the Impact Assessment were identified.



A report of EDI training was obtained. It was noted that two courses had been run. One course relating to Equality, Diversity & Inclusion for Managers and other relating to Equality, Diversity and Inclusion for office-based employees. The report stated the full name and start date of the employee, and which course the employee attended.





Delivery Risk:

Failure to deliver the service in an effective manner which meets the requirements of the organisation.

Ref	ef Expected Key Risk Mitigation		Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
PM	Performance Monitoring	There are agreed KPIs for the process which align with the business plan requirements and are independently monitored, with corrective action taken in a timely manner.	Partially in place	3 & 4	-
S	Sustainability	The impact on the organisation's sustainability agenda has been considered.	In place	-	-
R	Resilience	Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.	In place	-	-

Other Findings



As part of the staff survey the following aspects relating to Equality Diversity and Inclusion were included:

- I feel the Councils Directorate Days are beneficial. (Total response 288, strongly agree = 56 or 19%).
- I feel that Hybrid Working is beneficial. (Total response 282, strongly agree = 169 or 60%).
- I feel a sense of belonging to the Council (Total response 368, strongly agree = 91 or 25%).
- I feel my feedback is valued ((Total response 365, strongly agree = 69 or 19%).
- I feel I am treated fairly and with respect within the council. (Total response 366, strongly agree = 118 or 32%).
- I receive recognition when I do a job well. (Total response 364, strongly agree = 86 or 24%).



The Director of Housing, Health and Wellbeing confirmed that in relation to EDI, the process is paperless. Also, a more intuitive system will be developed to enable more information and complaints to be dealt with online.



The Human Resource Business Manager (HR and Training) confirmed that the following good practices have been adopted:

- The Council holds the accreditation for disability confident.
- Thrive at Work and the Armed Forces Covenant (Gold Status).
- A wide range of wellbeing facilities, including access to counselling, funded health cash plan and wellbeing champions.



Scope and Limitations of the Review

 The definition of the type of review, the limitations and the responsibilities of management in regard to this review are set out in the Annual Plan. As set out in the Audit Charter, substantive testing is only carried out where this has been agreed with management and unless explicitly shown in the scope no such work has been performed.

Disclaimer

2. The matters raised in this report are only those that came to the attention of the auditor during the course of the review and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Effectiveness of Arrangements

3. The definitions of the effectiveness of arrangements are set out below. These are based solely upon the audit work performed, assume business as usual, and do not necessarily cover management override or exceptional circumstances.

In place	The control arrangements in place mitigate the risk from arising.
Partially in place	The control arrangements in place only partially mitigate the risk from arising.
Not in place	The control arrangements in place do not effectively mitigate the risk from arising.

Assurance Assessment

4. The definitions of the assurance assessments are:

Substantial Assurance	There is a robust system of internal controls operating effectively to ensure that risks are managed and process objectives achieved.
Reasonable Assurance	The system of internal controls is generally adequate and operating effectively but some improvements are required to ensure that risks are managed and process objectives achieved.
Limited Assurance	The system of internal controls is generally inadequate or not operating effectively and significant improvements are required to ensure that risks are managed and process objectives achieved.
No Assurance	There is a fundamental breakdown or absence of core internal controls requiring immediate action.

Acknowledgement

5. We would like to thank staff for their co-operation and assistance during the course of our work.

Release of Report

6. The table below sets out the history of this report:

Stage	Issued	Response Received
Audit Planning Memorandum:	11 th November 2024	13 th November 2024
Draft Report:	7 th April 2025	14 th May 2025
Final Report:	20 th May 2025	

