

Borough Council of
**King's Lynn &
West Norfolk**



Corporate Performance Panel

Agenda

Wednesday, 3rd June, 2026
at 4.30 pm

in the

**Council Chamber, Town Hall, Saturday
Market Place, King's Lynn and available
for the public to [view on You Tube](#)**



King's Court, Chapel Street, King's Lynn, Norfolk, PE30 1EX
Telephone: 01553 616200

Tuesday 26th May 2026

Dear Member

Corporate Performance Panel

You are invited to attend a meeting of the above-mentioned Panel which will be held on **Wednesday, 3rd June, 2026 at 4.30 pm** in the **Council Chamber, Town Hall, Saturday Market Place, King's Lynn PE30 5DQ** to discuss the business shown below.

Yours sincerely

Chief Executive

AGENDA

1. Appointment of Vice - Chair for Municipal Year

2. Apologies

3. Minutes (Pages 5 - 8)

To approve the minutes from the Corporate Performance Panel held on the 15th April 2026.

4. Declarations of Interest (Page 9)

Please indicate if there are any interests which should be declared. A declaration of an interest should indicate the nature of the interest (if not already declared on the Register of Interests) and the agenda item to which it relates. If a disclosable pecuniary interest is declared, the Member should withdraw from the room whilst the matter is discussed.

These declarations apply to all Members present, whether the Member is part of the meeting, attending to speak as a local Member on any item or simply

observing the meeting from the public seating area.

5. Urgent Business Under Standing Order 7

To consider any business which, by reason of special circumstances, the Chairman proposed to accept as urgent under Section 100(b)(4)(b) of the Local Government Act 1972.

6. Members Present Pursuant to Standing Order 34

Members wishing to speak pursuant to Standing Order 34 should inform the Chairman of their intention to do so and on what items they wish to be heard before the meeting commences. Any Member attending the meeting under Standing Order 34 will only be permitted to speak on those items which have been previously notified to the Chairman.

7. Chair's Correspondence (if any)

8. Call Ins (if any)

9. Signing of the Scrutiny and Executive Protocol (Pages 10 - 13)

For the Chair to sign the Scrutiny and Executive Protocol.

10. Membership and Status of Task Groups and Informal Working Groups for 2026/2027 (Page 14)

11. Annual Complaints and Data Protection Monitoring Report (Pages 15 - 25)

12. Cabinet Report - Data Protection Policy 2026 (Pages 26 - 71)

13. Cabinet Report - Health and Safety Policy and Statement of Intent (Pages 72 - 91)

14. Panel Work Programme (Pages 92 - 95)

15. Cabinet Forward Decisions List (Pages 96 - 105)

16. Shareholder Committee Work Programme (Pages 106 - 112)

17. Date of Next Meeting

To note that the next meeting of the Corporate Performance Panel is scheduled to take place on 8th July 2026 at 4:30pm.

To:

Corporate Performance Panel: S Bearshaw, J Bhondi, P Bland, R Blunt (Chair), F Bone, A Dickinson, B Jones, J Kirk, B Long, S Nash, D Sayers and Mrs V Spikings

Portfolio Holders:

Councillor A Beales – Leader of the Council

Officers

Emma Hodds, Chief of Staff and Monitoring Officer

Charlotte Marriott, Interim Corporate Governance Manager

Tom Darling – Fernley, Senior Corporate Governance Officer

Mark Whitmore, Assistant Director for Health, Wellbeing and Public Protection

BOROUGH COUNCIL OF KING'S LYNN & WEST NORFOLK

CORPORATE PERFORMANCE PANEL

**Minutes from the Meeting of the Corporate Performance Panel held on
Wednesday, 15th April, 2026 at 4.30 pm in the Council Chamber, Town Hall,
Saturday Market Place, King's Lynn PE30 5DQ**

PRESENT: Councillors B Long (Chair), S Bearshaw, J Bhondi, R Blunt
(Vice - Chair), A Dickinson, B Jones, J Osborne and Mrs V Spikings

PORTFOLIO HOLDER:

Councillor Morley – Portfolio Holder for Finance

OFFICERS:

Honor Howell – Assistant Director, Transformation and Change
Carl Holland – Assistant Director, Finance and Deputy Section 151 Officer
Michelle Drewery – Deputy Chief Executive and Section 151 Officer
Emma Hodds – Monitoring Officer and Chief of Staff

CP106 **APOLOGIES**

Apologies were received from Councillor Sayers and Kirk.

CP107 **MINUTES**

RESOLVED: The minutes from the previous meeting were agreed as a correct record and signed by the Chair.

CP108 **DECLARATIONS OF INTEREST**

There were no declarations of Interest.

CP109 **URGENT BUSINESS UNDER STANDING ORDER 7**

There was none.

CP110 **MEMBERS PRESENT PURSUANT TO STANDING ORDER 34**

There was none.

CP111 **CHAIR'S CORRESPONDENCE (IF ANY)**

[Click here to view the recording of this item on YouTube.](#)

The Chair, Councillor Long highlighted to Members of the Panel, the report on the Notice of Motion on Lynnsport had been scheduled for this meeting however had been deferred to the scheduled Panel meeting in July due to the availability of the Member who had submitted the Notice of Motion.

CP112 **CALL INS (IF ANY)**

There were no call-ins to consider.

CP113 **CABINET REPORT - QUARTER 3 BUDGET MONITORING**

[Click here to view the recording of this item on YouTube.](#)

Portfolio Holder, Councillor Morley provided an introduction to the report and the Assistant Director for Finance and Deputy Section 151 Officer highlighted a forecast surplus, increased general reserves, and key movements in revenue and capital budgets.

The Assistant Director for Finance and Deputy Section 151 Officer explained that the forecast surplus for quarter three is £585,000, an improvement from the quarter two forecast of £383,000, mainly due to identified savings from vacant posts and recruitment processes, as detailed in Appendix A. The general fund reserve was forecast to reach £10.6 million by year-end, a significant improvement from previous predictions, attributed to the surplus and effective financial management. A minor last-minute amendment was made to the capital programme, with the updated budget for 2025-26 set at £40.3 million and 63% of this revised budget spent by the end of quarter three. The panel was informed that overdue debts, particularly those older than six months, were decreasing, and that the council's return on investments exceeded budget due to higher interest rates, despite lower than anticipated cash balances.

Portfolio Holder, Councillor Morley outlined the addition of £30,000 to the capital programme for a feasibility study at South Lynn Fire Station, initiated by Councillor De Winton, with the aim of enhancing training facilities in collaboration with the Fire and Rescue Authority.

In response to a question from Councillor Osborne, the Assistant Director for Finance and Deputy Section 151 Officer clarified a robust review of earmarked reserves led to the creation of a new £3.77 million reserve for the capital programme.

The Vice – Chair, Councillor Blunt commented on the additional funding allocated for the local plan and enquired if the work had been quantified. The Assistant Director for Finance and Deputy Section 151 Officer explained a contribution of £526,000 surplus from the 2024-25 revenue outturn was allocated to support the planning team in delivering the local plan, as agreed by Cabinet and Council. The

planning service was actively seeking to reduce costs by delivering as much as possible in-house and leveraging work from the previous local plan cycle. The need for rapid delivery of the local plan was driven by central government, creating significant time pressure and necessitating additional funding.

The Chair, Councillor Long questioned the Public Works Loan Board (PWLB) rates and the re-negotiation of the loan from Barclays. The Assistant Director for Finance and Deputy Section 151 Officer explained The Borough Council repaid and closed two long-standing Barclays loans, achieving a discount of approximately £2 million, and replaced them with an £8 million loan from the Public Works Loan Board at a higher short-term interest rate. The decision to accept a higher short-term interest rate was made after modelling by independent treasury advisors, with the expectation that the long-term financial benefit from the loan discount would outweigh the short-term increase in interest costs.

Councillor Bearshaw sought further detail in relation to Appendix A, highlighting Community Safety and Nuisance and Marmot initiative. The Assistant Director for Finance and Deputy Section 151 Officer explained the significant variances in the Marmot Initiative budget line were attributed to differences in profiling and timing of actuals versus forecasts. He agreed to provide a detailed breakdown of the large variance in the Marmot Initiative budget line and send the information post-meeting.

The Vice – Chair, Councillor Blunt, questioned the trend variance going forward on the revenue budget. Discrepancies between summary and detailed revenue budget figures were clarified by the Assistant Director for Finance and Deputy Section 151 Officer as resulting from differences in financing and borough spend, with the total surplus aligning once these factors were considered.

Councillor Jones questioned the recovery of Housing Benefits Overpayments. The Assistant Director for Finance and Deputy Section 151 Officer explained the challenges in forecasting housing benefit recovery due to the ongoing transition to Universal Credit, with actual recoveries coming in lower than budgeted and future estimates expected to be adjusted accordingly. The transition to Universal Credit has made it difficult to predict housing benefit overpayment recoveries, as the pace of transition has varied and is now accelerating. Responsibility for collecting overpaid housing benefits is shifting to the Department of Works and Pensions, and the council's role in this area will diminish over time.

RESOLVED: The Panel supported the onward recommendations of the Quarter 3 Budget Monitoring report.

Cabinet Recommendation:

1. Note the forecast outturn for Revenue and Capital monitoring position as of 31st December 2025 for 2025/2026.
2. Agree to update the Capital Programme as set out in section 3 of the report.

CP114 **PANEL WORK PROGRAMME**

RESOLVED: The Panel Forward Decision List was noted.

CP115 **CABINET FORWARD DECISIONS LIST**

RESOLVED: The Cabinet Forward Decision List was noted.

CP116 **SHAREHOLDER COMMITTEE WORK PROGRAMME**

RESOLVED: The Shareholder Committee Work Programme was noted.

CP117 **DATE OF NEXT MEETING**

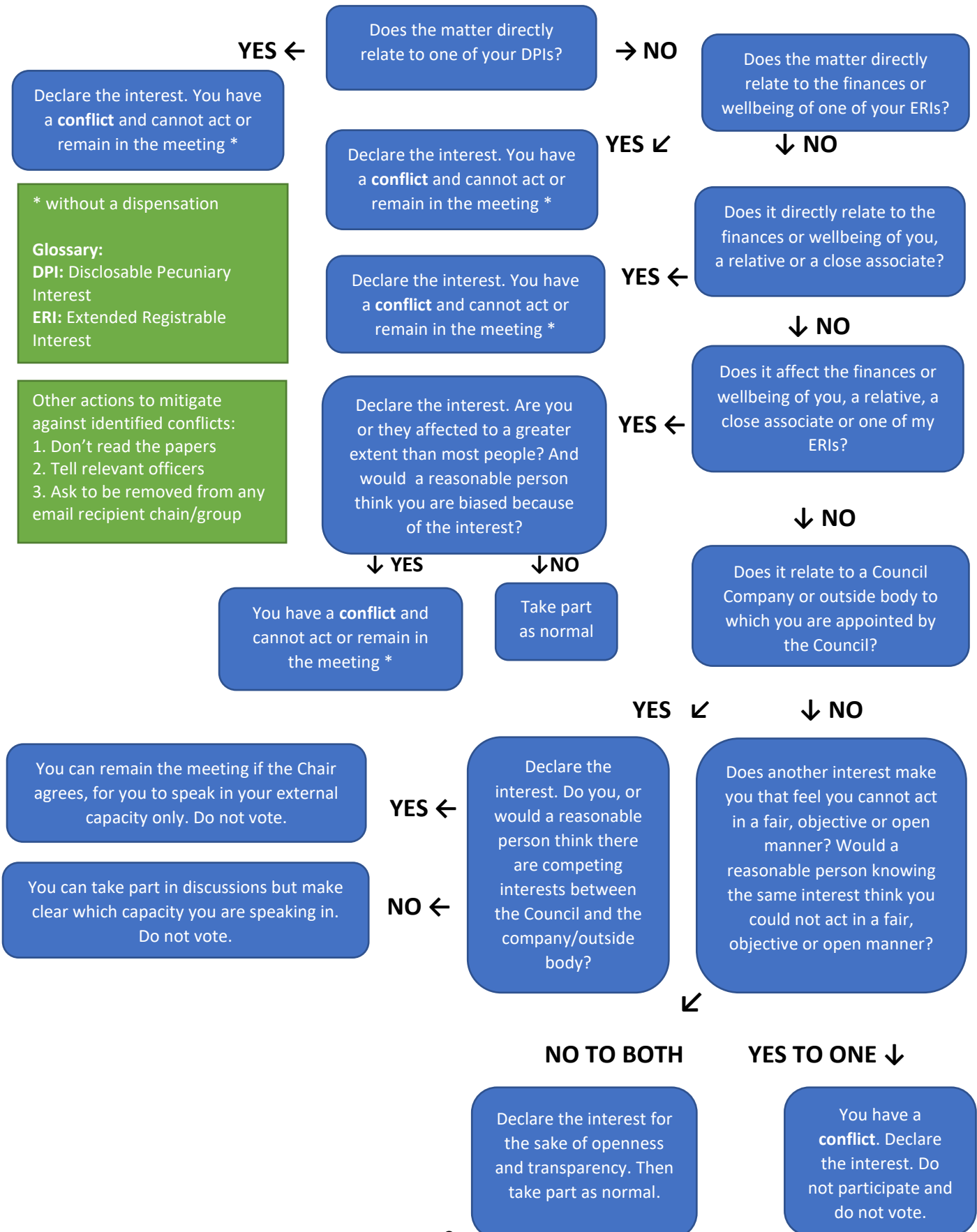
The next meeting of the Corporate Performance Panel was scheduled to take place on 3rd June 2026 at 4:30pm in the Town Hall, Saturday Market Place.

The meeting closed at 5.08 pm

DECLARING AN INTEREST AND MANAGING ANY CONFLICTS FLOWCHART



START



Declare the interest. You have a **conflict** and cannot act or remain in the meeting *

* without a dispensation

Glossary:

DPI: Disclosable Pecuniary Interest

ERI: Extended Registrable Interest

Other actions to mitigate against identified conflicts:

1. Don't read the papers
2. Tell relevant officers
3. Ask to be removed from any email recipient chain/group

Scrutiny and the Executive Protocol



CONTENTS

1.	Introduction	
2.	Background	
2.	Purpose of the Protocol	
4.	Scrutiny's Functions	
5.	Holding the Executive to Account	
6.	The Executive Role in the Scrutiny Process	

1. Terminology

Scrutiny is shorthand for 'Overview & Scrutiny' which was a legislative function and concept first introduced by the Local Government Act 2000. Under the Council's Constitution, Scrutiny is undertaken by the Policy Review and Development Panels.

Executive means the Cabinet, as the Council adopts the strong Leader and Cabinet model of governance.

2. Background

The Local Government Act 2000 introduced new models of governance for local authorities that moved away from the Committee structure, in which there is a **separation of decision-making** and **scrutiny** of those decisions.

The objective of the Leader and Cabinet governance model is to deliver greater efficiency, transparency and accountability of local authorities. The model is intended to ensure that decisions can be taken more quickly and efficiently than in the committee system, that the individuals or bodies responsible for decision-making can be more readily identified by the public and that those decision-makers can be held to account in public by overview and scrutiny committees.

The Executive is charged with **implementing** the agreed budget and policy framework. Overview and Scrutiny committees are charged with **holding the Executive accountable for that implementation**. The Act also envisages that Overview & Scrutiny Committees **advise** the Executive and Council **on policy development**.

Scrutiny is the counterweight to the Cabinet model of governance.

3. Purpose of the Protocol

This Protocol sets out the expectations on how the Council's Policy Review and Development Panels and Cabinet interact to enable the Panels to carry out an effective Scrutiny function.

The Protocol aims to establish a positive framework to enable the Panels to work effectively. It aims to promote and maintain an ethos of mutual respect, trust and courtesy between Panel Members, the Executive and officers and encourage constructive challenge.

4. Scrutiny's Functions

The Terms of Reference for each Policy Review and Development Panel are set out in Part of the Constitution, which sets out the Terms of Reference for the primary Council's Bodies.

Scrutiny is not decision-making. The core headline statutory functions of Scrutiny are as follows:

Function	What this looks like
Accountability	Holding the Executive to account for decisions, performance and use of resources.
Constructive challenge	Acting as a 'critical friend' to improve decisions and policies
Policy development	Contributing early to shape strategy and priorities.
Performance oversight	Monitoring how well services and partnerships deliver for residents
Community voice	Bringing residents' perspectives and evidence into decision-making
Transparency and learning	Ensuring decisions and outcomes are open to examination and improvement

5. Holding the Executive to Account

Should look like:

- Providing a "critical friend" challenge
- Analysing evidence against proposals for improvement
- Formulating clear, concise, evidence-based recommendations which have been subject to feasibility considerations
- Identification of areas for improvement, methods for measuring the impact of improvements and realistic timeframes for implementation and feedback
- Questions and challenge should be relevant, proportionate and appropriate
- Challenge should be focused on strategic matters that add value and impact
- Working with the Executive to develop Council policies
- Where possible, identifying and raising in advance specific requests for further information or other evidence required for the Panel's functions
- Working collaboratively to achieve the best outcome for residents
- An atmosphere of openness and climate of mutual respect and trust between all participants.

Should not look like:

- Confrontation
- Challenging individuals or personalities
- Party politics
- Conducting a witch hunt
- Rubber stamping Cabinet decisions
- Championing a personal agenda

6. The Executive Role in the Scrutiny Process

- Portfolio Holders are invited to attend any Scrutiny meeting where a decision or proposed decision falling in their Portfolio is to be scrutinised, including via the call-in process. In their absence they should arrange for the Leader, Deputy Leader or another Portfolio Holder to attend in their place.
- Portfolio Holders are to be questioned and held accountable for their decision or proposed decision.
- Portfolio Holders should be prepared to:
 - present their report to the Panel;
 - provide justification for the recommendation, proposal or decision;
 - answer questions posed by Panel Members with regards to political matters underpinning the decision made or proposed.
 - answer questions on the rationale and policy objectives which resulted in the proposal/decision.
- Officers will be present to answer questions posed by the Panel Members concerning technical issues underpinning the report/decision.
- Cabinet and the Corporate Leadership Team will be consulted with by the Policy Review and Development Panels regarding the content of the Annual Work Programme for each Panel, to be agreed at the first meeting of the Municipal year by each Panel.
- Cabinet will invite the Panel Chair, or a representative from the Panel, to attend the Cabinet meeting where recommendation from the Panel is being considered. They can attend the meeting to speak on the item and present the recommendations from the Panels, this is especially important if the Panels have made counter recommendations for Cabinet's consideration.

Signed May 2026:

Leader of the Council.....

Chair of the Corporate Performance Panel.....

Chair of the Environment and Community Panel.....

Chair of the Regeneration and Development Panel.....

POLICY REVIEW AND DEVELOPMENT PANEL REPORT

REPORT TO:	Corporate Performance Panel		
DATE:	3 rd June 2026		
TITLE:	Membership of Task Groups and Informal Working Groups 2026/2027		
TYPE OF REPORT:	Operational		
REPORT AUTHOR:	Emma Briers, Democratic Services Officer		
OPEN/EXEMPT	Open	WILL BE SUBJECT TO A FUTURE CABINET REPORT:	Yes/No

REPORT SUMMARY/COVER PAGE

PURPOSE OF REPORT/SUMMARY:
<p>This report invites the Corporate Performance Panel to arrange for the appointment of Members to serve on the Informal Working Groups and Task Groups, which have previously been established by the Panel, for the municipal year 2026/2027</p> <p>The Panel has established the following groups:</p> <p>- Constitution Informal Working Group</p>
RECOMMENDATIONS:
<p>1. That the Constitution Informal Working Group remain established and the Panel to confirm Membership of the Group</p>

REPORT DETAIL

Background (For information)

2025/2026 Membership of the Constitution Informal Working Group is:

Terms of Reference state that the Group should compromise of seven Members plus two Cabinet Members:

Informal Working Group Members: Councillors Bearshaw, Dickinson, Long, Osborne, Ryves, Ware and Lintern.

Cabinet Members: Councillors Beales and Moriarty

POLICY REVIEW AND DEVELOPMENT PANEL REPORT

REPORT TO:	Corporate Performance Panel		
DATE:	3 June 2026		
TITLE:	2025-26 Corporate Complaints and Data Protection Monitoring Report		
TYPE OF REPORT:	For information only		
PORTFOLIO(S):	Cllr Alistair Beales		
REPORT AUTHOR:	Charlotte Marriott – Interim Corporate Governance Manager		
OPEN/EXEMPT	Open	WILL BE SUBJECT TO A FUTURE CABINET REPORT:	No

REPORT SUMMARY/COVER PAGE

PURPOSE OF REPORT/SUMMARY:
<p>This is the annual monitoring report for the period 1 April 2025 – 31 March 2026 and provides a high-level breakdown of MP enquires, Corporate and Ombudsman Complaints and provides details on compliments and comments received during this period.</p> <p>This report also provides an overview of Data Protection and Information Governance processes, including Freedom of Information (FOI) requests received, Data Protection breaches reported corporately, together with breaches reported to the Information Commissioners Office (ICO), for the same period.</p>
KEY ISSUES:
<ol style="list-style-type: none"> 1. Compliance with Data Protection legislation is a statutory requirement for any organisation that processes personal data. 2. We are required to follow the guidance and best practice from the Local Government and Social Care Ombudsman on the handling of complaints.
OPTIONS CONSIDERED:
<ol style="list-style-type: none"> 1. The report is presented to the Corporate Performance Panel members for oversight and scrutiny.
RECOMMENDATIONS:
<ol style="list-style-type: none"> 1. Members of the Corporate Performance Panel are asked to scrutinise the content of this report.
REASONS FOR RECOMMENDATIONS:
<ol style="list-style-type: none"> 1. The recommendation is made to align with the Corporate Performance Panel's core role in scrutinising corporate performance.

REPORT DETAIL

1. Introduction

- 1.1 This annual monitoring report covers the period 1 April 2025 to 31 March 2026 and sets out the council's performance in complying with data protection legislation, internal policies, and the codes of practice governing the handling of complaints. It provides a high-level breakdown of MP enquires, Corporate and Ombudsman Complaints and provides details on compliments and comments received during this period.
- 1.2 The annual monitoring report for the last financial year identified several risks arising from the council's Data Protection practices. Work was already underway to strengthen the strategic and operational approach in this area, and we are starting to see compliance improve, particularly in relation to the Freedom of Information Act 2000.
- 1.3 Revised policies for Corporate Complaints and Data Protection are currently being finalised and will be presented to the committee in due course for consideration.
- 1.4 It is worth noting that the Data (Use and Access) Act 2025 places new duties on organisations to publish a data protect complaints process, this new requirement comes into force at the end of June 2026. Our revised Data Protection policy will include a strengthen data protection complaint process in response to this new requirement.
- 1.5 The Corporate Governance team have faced significant resources challenges over the past few months, particularly affecting the staff that are responsible for managing and coordinating data protection matters.

2. Monitoring Report

2.1 Summary

- 46% increase in MP Enquiries from the previous year
- 47% increase in Corporate Complaints from the previous year
- FOI/EIR requests remain stable, although very high
- FOI/EIR compliance has increased to 91% - demonstrating a 30% increase in our compliance rate from the previous year

2.2 MP Enquiries

MPs are often contacted by their constituents for help and advice on a range of local issues or individual problems with a service delivered by the council. These are then passed to the relevant Service Manager for a response.

A total of 138 MP enquires were received during 2025-26, compared with 94 the previous year (2024-25).

A breakdown of the MP enquiries received and the service area they relate to is attached at Appendix A.

2.3 Corporate Complaints

72 Corporate Complaints were received during 2025-26, compared with 49 the previous year (2024-25). A breakdown of the outcomes of these complaints is included in the table below:

Stage 1

Justified and upheld	15
Not justified, not upheld	40
Partially upheld	10

The outcomes of 18 of those 72 complaints received were appealed (stage 2). A breakdown of the appeal outcomes is included below

Stage 2

Justified and upheld	2
Not justified, not upheld	12
Partially upheld	4

A breakdown of the complaints received and the service area they relate to is attached at Appendix B.

2.4 Ombudsman Complaints

In total 9 complaints were considered by the Local Government and Social Care Ombudsman (LGSCO), none were investigated. Attached at Appendix C is the Ombudsman Annual Report 2025-26 for information.

2.5 Compliments

Whilst we receive complaints about a range of issues, we also receive compliments from customers, visitors and businesses expressing their gratitude and thanks for the service they received. This feedback is shared with the relevant service manager and is celebrated in Our News to acknowledge the service provided by that individual or team.

During 2025-26, the Corporate Governance team received 10 compliments from our residents regarding the below services:

- Planning
- Property Services
- Waste and Recycling
- Crematorium
- Street cleaning

- Parking
- CSNN/out of hours

The Customer Information Centre (CIC) team also receive several compliments over the telephone from customers, but these are not formally recorded.

2.6 Freedom of Information (FOI) & Environmental Information Regulations (EIR) Requests

- The Freedom of Information Act 2000 (FOIA) gives the public a right of access to recorded information held by public authorities, subject to defined exemptions. The Council must respond to requests within 20 working days and maintain.
- The Environmental Information Regulations 2004 give the public a right of access to environmental information, with a stronger presumption in favour of disclosure than FOIA. EIR requests arise frequently across planning, highways, flood risk and waste services and are subject to the same 20 working day response obligation.

During 2025-26 a total of 789 FOI/EIR requests were received, this is broadly in line with the previous year (794).

Of the 789 requests **91.2%** were completed within the statutory timeframe of 20 working days. Our compliance rate for responses within the statutory timeframe last year was 61% - this clearly demonstrates a significant positive increase in our compliance and demonstrates the improvements we have made so far. The ICO states compliance rates that are less than 90% are 'unsatisfactory'. We are now above the 90% threshold that the Information Commissioner's Officer (ICO) specify as a satisfactory compliance rate. We are committed to increasing compliance further.

A graphical illustration and breakdown of requests received are attached at Appendix D.

If the requestor is not satisfied with the response to their information request, they can complain to the ICO. For the year 2025-26, 7 FOI/EIRs were escalated to the ICO, none were upheld.

2.7 Data Subject Access Requests (DSARs)

- The UK GDPR provides the right for individuals to request copies of their personal data from an organisation.

During the 2025-26 financial year we received 18 DSARs. These requests are often complex in nature and time consuming for Officers to respond to. Statutory timeframe for response is typically one calendar month. Our response compliance rate for 2025-26 was 94%.

2.8 Schedule 2 Requests

- A Schedule 2 data protection request is a legal provision under the Data Protection Act 2018 that allows specific organisations, such as the police, to request personal data without the data subject's consent, typically for crime prevention or detection.

During 2025-26 we received 136 schedule 2 requests, compared to 58 requests the previous year (134% increase). These requests often require immediate attention and responses, however the statutory timeframe is the same as a DSAR – one calendar month.

Our Schedule 2 request compliance for 2025-26 was 95%.

2.9 Data Breaches

- A data breach is an incident where data we are responsible for is lost, viewed by an unauthorised individual, corrupted or stolen.
- Breaches that pose a high risk to individuals must be reported to the ICO 'without undue delay, and at the latest within 72 hours after having become aware of the breach'.

During 2025-26, 34 data breaches were reported to the Data Protection Officer (DPO), a slight increase from the previous year (32). 23 were assessed confirmed breaches.

Reported breaches are assessed by the DPO to establish if they are reportable to the ICO. Of the 23 confirmed breaches, 4 were assessed as high risk and reported to the ICO. The ICO took no further action on 3 cases, we are still awaiting the outcome of the fourth case.

2.10 Code of Conduct Complaints

This information is reported to the Standards Committee on an annual basis. Further information can be found [here](#)

2.11 Leisure and Culture Services

The below information has been provided by our Leisure and Culture team, as they are not currently aligned with corporate processes, and therefore record and monitor these functions separately. Work is underway to align these key corporate functions for 2026-27.

No. of MP Enquiries	0
No. of complaints received	199
No. justified - upheld	-

No. not justified – not upheld	-
No partially upheld	-
Total no. of stage 2 complaints (appeals)	0
Justified and upheld	0
Not justified, not upheld	0
Partially upheld	0
Ombudsmen complaints	0
No of compliments received	191
No of FOI/EIR received	19
Compliance with statutory timeframe (%)	100%
No referred to ICO	0
No of DSARs received	2
No of data breaches reported	0

3. Issues for the Panel to Consider

3.1 The panel are asked to note the content of this report.

4. Corporate Priorities

4.1 Data protection and corporate complaints, compliments and comments processes span all corporate priorities.

5. Financial Implications

5.1 N/A – report is for monitoring purposes only, however, it is worth noting the financial risk that non-compliance can result in.

6. Any other Implications/Risks

6.1 Reputational risk if complaints and data protection matters are not handled effectively

6.2 Financial risk if complaints and data protection matters are not handled correctly and in line with ombudsman and statutory requirements

7. Equal Opportunity Considerations

7.1 None – report is for monitoring purposes only.

8. Environmental Considerations

8.1 None

9. Consultation

9.1 N/A - report is for monitoring purposes only.

10. Conclusion

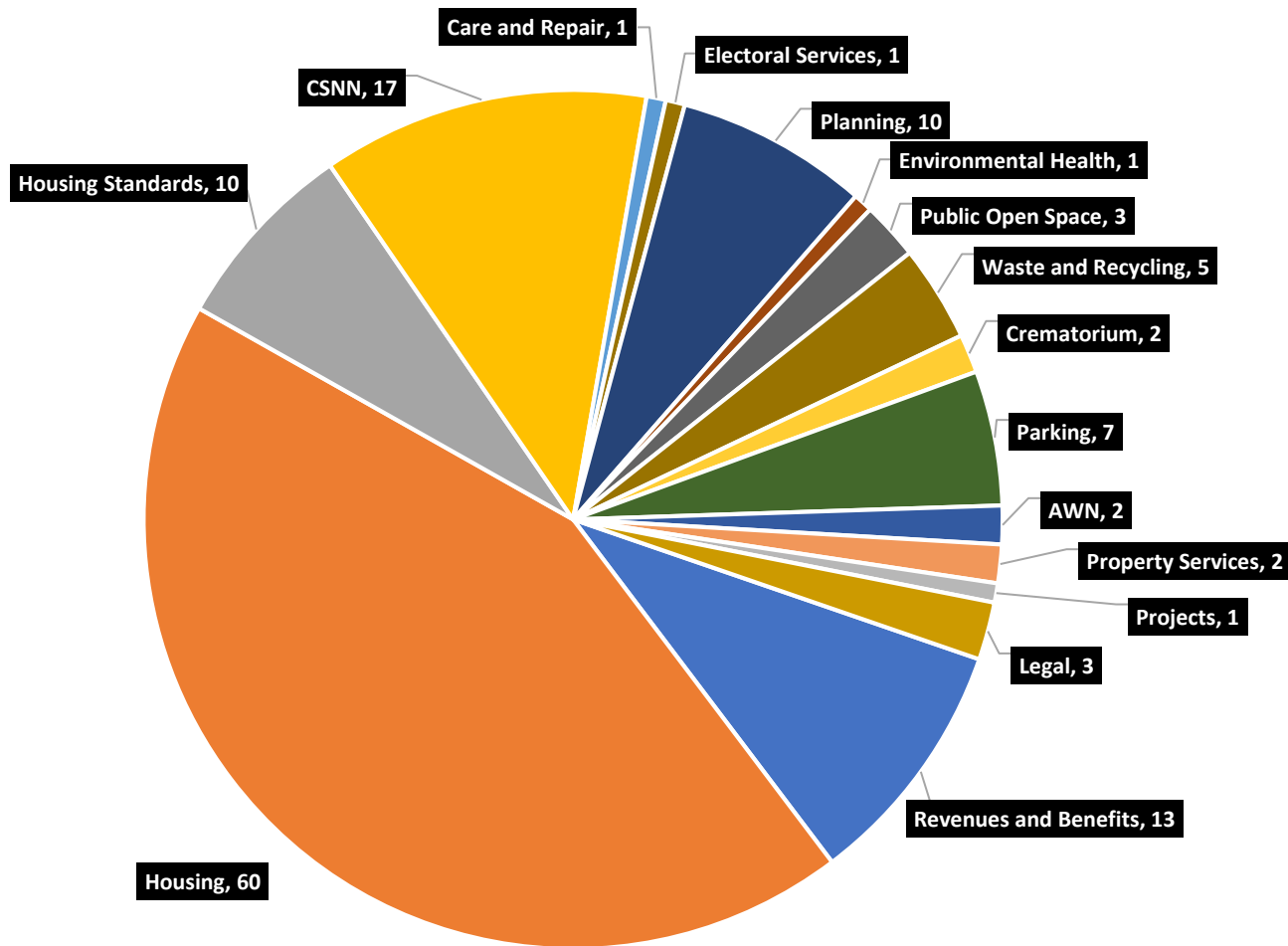
10.1 The panel are asked to scrutinise the content of this report.

11. Background Papers

11.1 [Agenda for Corporate Performance Panel on Wednesday, 25th February, 2026, 4.30 pm](#)

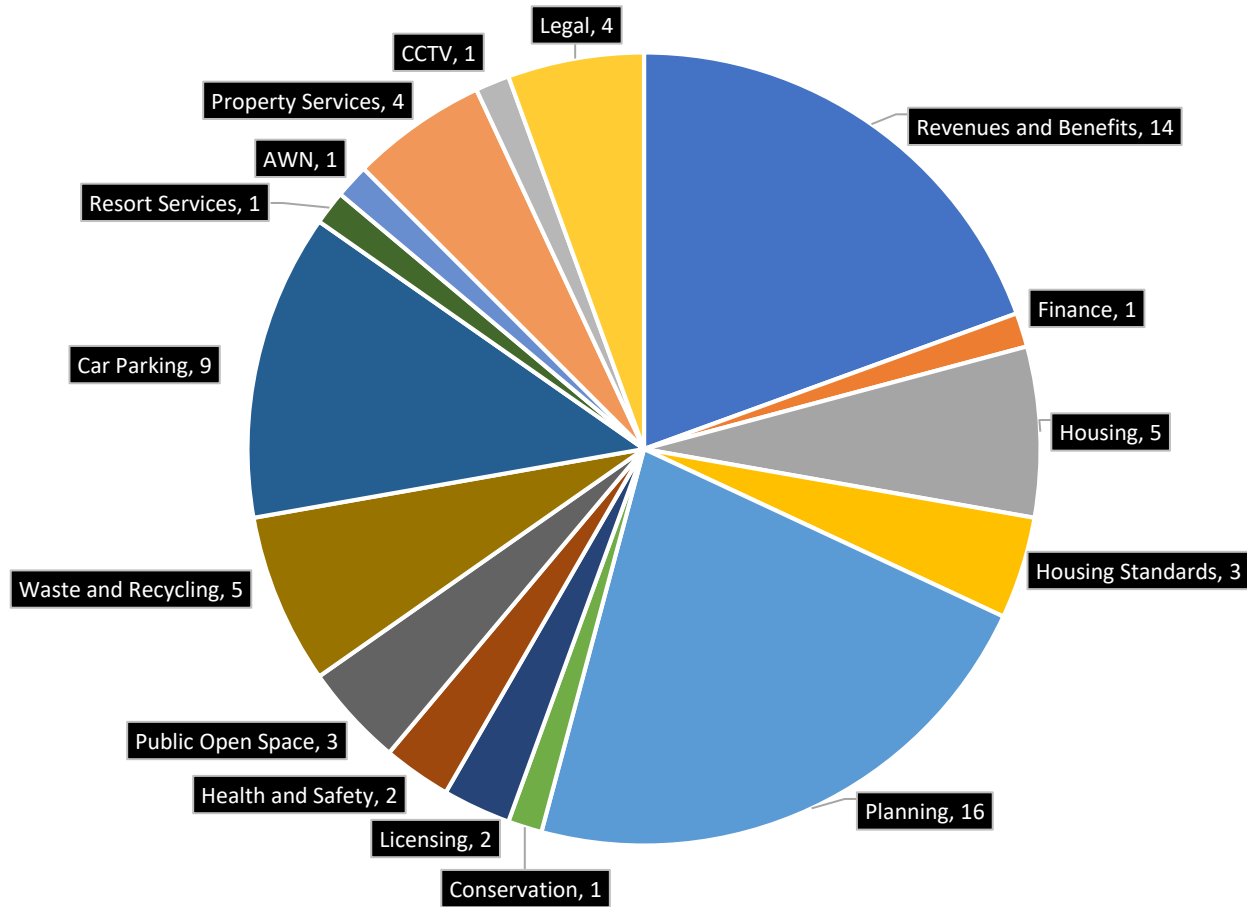
Appendix A -

MP enquiries by service area 2025-2026



Appendix B -

Stage one corporate complaints by service area 2025-2026



Appendix C – HOLD FOR LGSCO letter



20 May 2026

By email

Ms Blakemore
Chief Executive
King's Lynn & West Norfolk Council

Dear Ms Blakemore

Annual Review letter 2025-26

I write to you with your annual summary of complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2026.

We recognise that local authorities continue to face significant pressures in delivering services to their communities. We hope the data and insight we share with you each year remains a useful tool for reflection and continuous improvement. Please consider it as part of your corporate governance processes.

[Your annual statistics are available here.](#)

In addition, you can find the detail of the decisions we have made about your Council, read reports we have issued, and view the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

We will write to organisations in July where there is exceptional practice or where we have concerns about complaint handling. Not all organisations will get a letter. If you do receive a letter it will be sent in advance of its publication on our website on 15 July 2026.

Supporting complaint and service improvement

We remain committed to supporting the sector to embed effective systems of redress. Where authorities are navigating reorganisation and devolution, we are ready to help ensure that robust complaint handling is built into new arrangements from the outset. Please do get in touch if your organisation would benefit from our advice and guidance.

Our [Complaint Handling Code](#), in force since April 2025, is now applied in our casework and offers structure and support to your local complaint system. Our training programme provides a flexible, expert-led route to building complaints capability across your teams, with courses open for individual delegates to book. Contact training@lgo.org.uk for more information.

Our Annual Review of Local Government Complaints will be published in July 2026, setting out the national picture of complaints, trends across service areas, and emerging systemic issues. We encourage you to read it alongside your own organisation's data.

Yours sincerely,

A. K. Clarke

Amerdeep Clarke
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

Complaint overview

Reporting year

2025 / 2026

Update results

Between 1 April 2025 to 31 March 2026, we dealt with 9 complaints. Of these, 3 were not for us or not ready for us to investigate. We assessed and closed 6 complaints. We investigated 0 complaints.

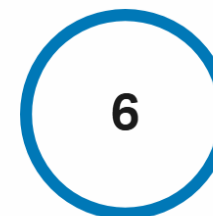
You can [search the decisions](#) behind these statistics and read our [annual letters to this council](#).



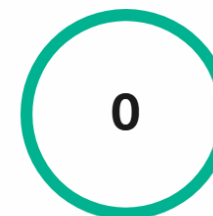
Complaints dealt with



Not for us



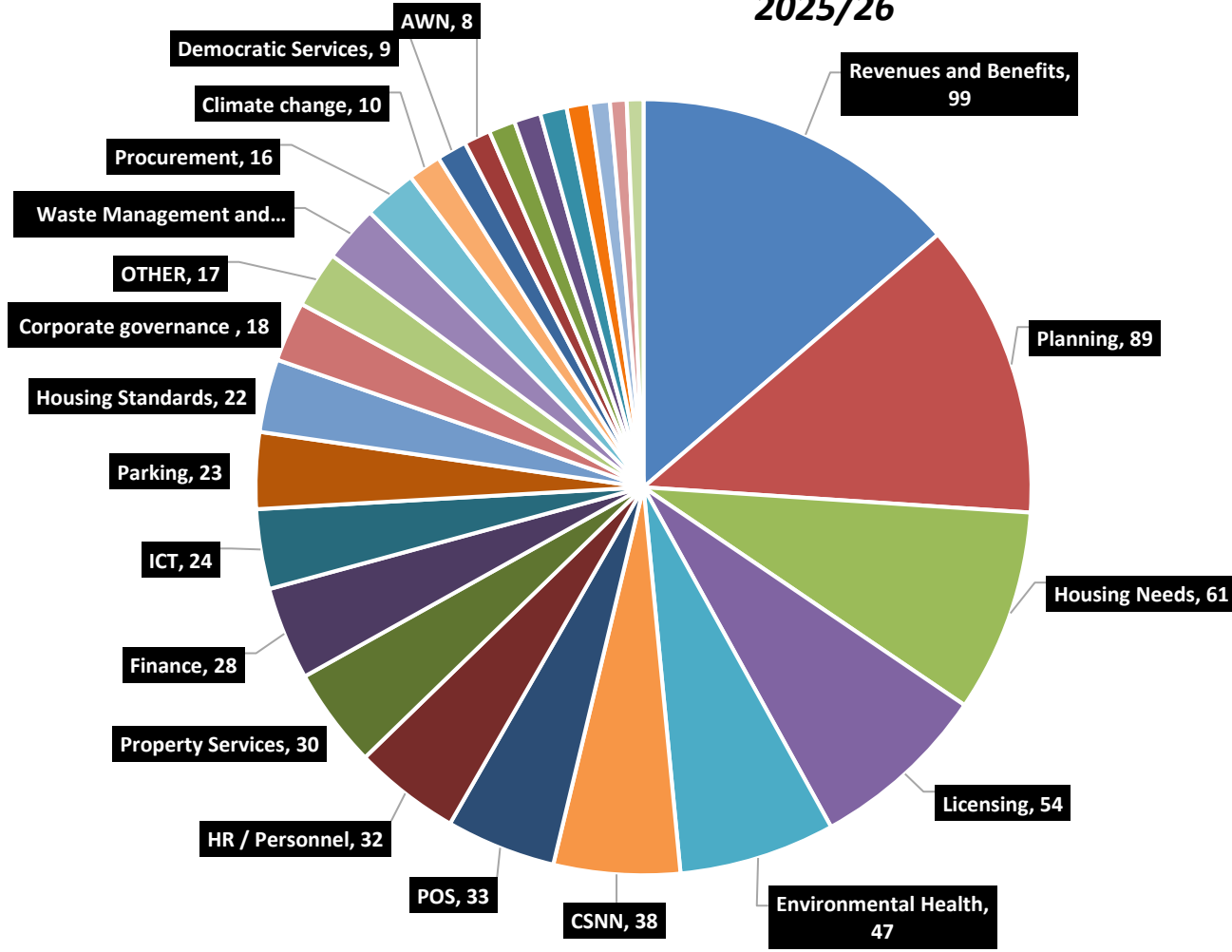
Assessed and closed



Investigated

Appendix D –

**Number of FOI/EIR Requests Received by Department
2025/26**



Service area	Number of Request Received
Revenues and Benefits	99
Planning	89
Housing Needs	61
Licensing	54
Environmental Health	47
CSNN	38
POS	33
HR / Personnel	32
Property Services	30
Finance	28
ICT	24
Parking	23
Housing Standards	22
Corporate governance	18
OTHER	17
Waste Management and Recycling	17
Procurement	16
Climate change	10
Democratic Services	9
AWN	8
Crematorium and Cemeteries	8
Planning Enforcement	8
Resorts	8
Housing Strategy	7
Legal Services	6
Comms	5
Regeneration	5

POLICY REVIEW AND DEVELOPMENT PANEL REPORT

REPORT TO:	Corporate Performance Panel		
DATE:	3 rd June 2026		
TITLE:	Data Protection Policy 2026		
TYPE OF REPORT:	Cabinet Report		
PORTFOLIO(S):	Leader, Councillor Beales		
REPORT AUTHOR:	Tom Darling - Fernley		
OPEN/EXEMPT	Open	WILL BE SUBJECT TO A FUTURE CABINET REPORT:	Yes

REPORT SUMMARY/COVER PAGE

PURPOSE OF REPORT/SUMMARY:
Members are directed to the attached report for the purpose and summary.
KEY ISSUES:
Members are directed to the attached report for full details of the key issues.
OPTIONS CONSIDERED:
Members are directed to the attached report for full details of the options.
RECOMMENDATIONS:
To consider the report and make any appropriate recommendations to Cabinet.
REASONS FOR RECOMMENDATIONS:
To scrutinise recommendations being made for an executive decision.



DATE OF MEETING	9 June 2026
REPORT TITLE	Data Protection Policy 2026
LEAD MEMBER	Cllr A Beales, Leader
LEAD OFFICER	Tom Darling-Fernley, Senior Corporate Governance Officer
CONSULTEES	Executive Leadership Team
WARDS AFFECTED	n/a

KEY DECISION	NO
DECISION MAKER	Cabinet
IS THE REPORT OPEN OR EXEMPT	OPEN

FINANCIAL IMPLICATIONS	YES
HR IMPLICATIONS	YES
POLICY IMPLICATIONS	YES
STATUTORY IMPLICATIONS	YES
RISK MANAGEMENT IMPLICATIONS	YES
ENVIRONMENTAL IMPLICATIONS	NO
EQUALITY IMPACT ASSESSMENT COMPLETED	Pre-screening completed. Full EIA not required, see section below.

SUMMARY OF REPORT

The Council's Data Protection Policy was last revised in June 2024. This report presents a substantially revised Policy for Cabinet approval. The revision responds to the Data (Use and Access) Act 2025 ("DUAA"), which introduces a statutory requirement, taking effect on 19 June 2026, for the Council to have a published data protection complaints procedure in place. The revised Policy also updates and restructures the document to reflect the current legal landscape, to align with the Council's standard policy document layout, and to reflect changes to the Council's information governance structure since the 2024 edition. There are no direct financial implications arising from this report.

RECOMMENDATIONS

Cabinet resolves to:

1. Approve the Data Protection Policy 2026 at Appendix A, to take effect from the date of this meeting.
2. Note that the data protection complaints procedure required under section 103 of the Data (Use and Access) Act 2025 (inserting section 164A into the Data Protection Act 2018) will be published on the Council's website by 19 June 2026 in accordance with the statutory deadline.

3. Authorise the Data Protection Officer, in consultation with the Leader of the Council to update the Policy between formal review cycles where required by changes to ICO guidance or legislation, subject to those updates being reported to the next available Cabinet meeting.

REASON FOR DECISION

The Council has a statutory obligation to comply with UK GDPR, the Data Protection Act 2018, and from 19 June 2026 the data protection complaints procedure requirement introduced by the Data (Use and Access) Act 2025. The existing policy predates the DUAA and does not reflect the new complaints procedure obligation.

Approval of the revised Policy is necessary to ensure the Council is demonstrably compliant with its legal obligations by the statutory deadline, to protect individuals whose data the Council processes, and to protect the Council from the risk of regulatory enforcement action by the Information Commissioner's Office.

CORPORATE STRATEGY

How does this proposal support our Corporate Priorities [Our priorities | Corporate Strategy 2023 - 2027 | Borough Council of King's Lynn & West Norfolk](#)

Promote growth and prosperity to benefit West Norfolk	Robust data protection practice underpins the Council's commercial and economic development functions, including in relation to business support, inward investment, and the Council's commercial leisure operations, all of which involve processing personal data at scale.
Protect our Environment	No direct linkage.
Efficient and effective delivery of our services	The revised Policy supports the Council's ambition to deliver services to residents, businesses and visitors in a timely, accessible and trustworthy manner. Sound information governance is a prerequisite for effective digital and transactional service delivery.
Support our communities	The Council's community-facing services (including but not limited to housing benefit, homelessness, social prescribing and health and wellbeing programmes) involve processing sensitive personal data. This Policy ensures those activities are conducted lawfully and with the dignity of residents at the fore. The Corporate Strategy 2023–2027 explicitly lists Data Protection as a foundational corporate plan underpinning delivery of the strategic priorities.

REPORT DETAIL

1. Introduction

- 1.1. The Council, as a public authority, is a data controller under the UK General Data Protection Regulation ("UK GDPR") and the Data Protection Act 2018 ("DPA 2018"). The Council's Electoral Services department is also a data controller. This policy applies to both. The Council and its partners and contractors process personal data across all its service areas and are legally required to do so in accordance with data protection legislation.
- 1.2. The Council's Data Protection Policy sets out how personal data is collected, stored, used and protected. It applies to all officers, elected Members, contractors and any person processing personal data on the Council's behalf.
- 1.3. The Policy was last formally approved by Cabinet on 11 June 2024 (item CAB16). A substantially revised version is now presented for approval.

2. Background

- 2.1. The Council has maintained a Data Protection Policy since the introduction of the General Data Protection Regulation in May 2018. The Policy has been revised periodically: most recently in November 2023 (version 0.03) following routine review.
- 2.2. On 19 June 2025, the Data (Use and Access) Act 2025 ("DUAA") received Royal Assent. The DUAA amends but does not replace the UK GDPR and the DPA 2018. Most of its data protection provisions came into force on 5 February 2026. Section 103 of the DUAA inserts a new section 164A into the DPA 2018, which requires organisations to have a published data protection complaints procedure in place by 19 June 2026. This is a hard statutory deadline.
- 2.3. Separately, the ICO published updated guidance on handling data protection complaints in February 2026, setting out what an adequate complaints procedure must contain, including: a requirement to acknowledge complaints within 30 calendar days; a duty to investigate without undue delay; and a requirement to communicate outcomes and signpost complainants to the ICO where they remain dissatisfied.
- 2.4. The existing Policy predates the DUAA and does not adequately address the complaints procedure requirement. A substantive revision is therefore necessary both to achieve statutory compliance by 19 June 2026 and to bring the Policy up to date with the broader legal landscape.

- 2.5. The revision has also been used as an opportunity to restructure the Policy in line with the Council's standard policy document taxonomy, to update the Council's information governance role structure (replacing Information Asset Assistants with a wider network of Information Governance Leads), and to remove and cross-refer to guidance-level material that is more appropriately located in supporting procedural documents and appendices.

3. Proposal

- 3.1. Cabinet is asked to approve the revised Data Protection Policy 2026, at Appendix A. The key changes from the 2023 edition are as follows:

Data protection complaints procedure (new)

- 3.2. The most significant change is the introduction of a dedicated complaints procedure in response to section 103 of the DUAA. The procedure sets out how individuals can raise a data protection complaint with the Council, the Council's acknowledgement obligation (within 30 calendar days), the investigation and outcome process, and the route of escalation to the ICO. A complaint is broadly defined: it covers any expression of dissatisfaction about how the Council has handled personal data and does not need to reference legislation to qualify. The procedure will be accompanied by an accessible electronic complaint form to be published on the Council's website by 19 June 2026.

Updated legal framework

- 3.3. The Policy's legal framework section has been expanded to provide brief contextual narrative against each piece of relevant legislation, and to incorporate the DUAA.
- 3.4. The Regulation of Investigatory Powers Act 2000 ("RIPA") and the Telecommunications (Lawful Business Practice) (Interception of Communications) Regulations 2000 have been added in light of the Council's operation of CCTV and the sharing of CCTV footage with Norfolk Constabulary under a formal Service Level Agreement.
- 3.5. The Privacy and Electronic Communications (EC Directive) Regulations 2003 ("PECR") have been given greater prominence in recognition of the Council's commercial leisure and cultural operations, which are subject to PECR's requirements around marketing communications and cookies.

Restructured to policy template

- 3.6. The 2023 edition did not follow the Council's standard policy document layout. The revised Policy adopts this structure, with a clear Executive Summary,

Introduction, Aims, SMART Objectives, Scope, Definitions, Legal Framework, Roles and Responsibilities, Policy provisions, Governance Arrangements, Additional Resources, and Equality, Diversity and Inclusion section.

Clear objectives (new)

- 3.7. The revised Policy includes four SMART objectives: establishing the complaints procedure by 19 June 2026; improving response-on-time performance for data subject access requests and freedom of information requests; increasing information governance competence through training and the IG Leads network; and improving transparency and record-keeping, including via the regularisation of Article 30 records and proactive publication of disclosures.

Information governance structure updated

- 3.8. The role of Information Asset Assistant has been replaced by Information Governance Lead, reflecting a broader remit: IG Leads carry heightened awareness of information governance across their service area, maintain Article 30 records, and act as first points of contact for information rights requests and data protection complaints within their teams.

Roles and responsibilities clarified

- 3.9. The Policy now clearly distinguishes between the accountability of the SIRO (the Chief Executive, who is accountable for information risk) and the operational responsibility of the DPO (the Corporate Governance Manager, to whom the SIRO delegates day-to-day compliance). This is consistent with the ICO's expectations for demonstrable governance structures.

Scope clarified to include non-corporate channels

- 3.10. The Policy now expressly addresses personal data processed by officers or Members via personal devices or non-corporate messaging platforms in the course of Council functions. Such data falls within the scope of UK GDPR and this Policy, consistent with ICO guidance on personal email and messaging accounts.

Guidance-level material relocated

- 3.11. Material that was previously embedded in the policy body, including detailed breach reporting steps, DPIA criteria, and FOI procedural requirements, has been streamlined in the Policy and relocated to supporting procedural documents and appendices, making the Policy itself a cleaner statement of the Council's obligations and commitments.

Appendix A (data protection principles) enhanced

- 3.12. The revised Appendix A sets out each of the six UK GDPR data protection principles with worked examples drawn from district council service areas, to aid officer understanding and application.

Appendix B (conditions for special category and criminal offence data) enhanced

- 3.13. Appendix B to the policy now links explicitly to the Council's data retention schedules to identify processing activities that engage special category and criminal offence data. More generally, this appendix together with the policy now constitute an "appropriate policy document" for the Council within the meaning of the Data Protection Act 2018.

4. Options Considered

Option 1: Approve the revised Policy (recommended)

- 4.1. This is the only option that achieves statutory compliance with the DUAA by 19 June 2026 and brings the Council's policy framework up to date with the current legal landscape.

Option 2: Defer approval

- 4.2. This would see the Council push the full policy approval back in time and publish the complaints procedure as a standalone document. It would be technically possible to publish a standalone complaints procedure to meet the 19 June 2026 deadline without revising the full Policy. However, this would leave the Policy outdated and inconsistent with the procedure and would require a further Cabinet report in the short term. It is not recommended.

Option 3: Do nothing

- 4.3. Failure to have a published data protection complaints procedure in place by 19 June 2026 would place the Council in breach of a statutory obligation under the DPA 2018 (as amended by the DUAA). This would expose the Council to regulatory enforcement action by the ICO, potential punitive financial penalties and reputational damage. This option is not recommended.

5. Financial Implications

- 5.1. The revised Policy does not give rise to any direct financial implications. The complaints procedure will be administered within existing Corporate Governance team capacity. The Council's annual ICO registration fee is already met within existing budgets.

- 5.2. Non-compliance with data protection legislation carries significant financial risk. The Information Commissioner is empowered as regulator to issue effective, proportionate and dissuasive penalties for infringements.
- 5.3. Public bodies are usually issued with reprimands but can be issued with financial penalties in the most egregious cases. Egregiousness is determined as part of assessing the seriousness of an infringement.
- 5.4. For failure to comply with any of the data protection principles, any rights an individual may have under DPA 2018 Part 3, or in relation to any transfers of data to third countries, a higher maximum applies, which is £17.5mn or 4% of “turnover” (whichever is higher).
- 5.5. For infringement of other provisions, such as administrative requirements of the legislation, a standard maximum applies, which is £8.7 million or 2% of turnover.

6. HR Implications

- 6.1. The revised Policy reinforces existing mandatory data protection training requirements for all officers and Members. Targeted additional training for Information Governance Leads and customer-facing teams on recognising and escalating data protection complaints will be delivered by 19 June 2026, within existing team capacity.

7. Policy Implications

- 7.1. The revised Policy is designed to support the Council’s Corporate Strategy 2023–2027, which lists Data Protection as a foundational corporate plan. It has also been restructured to align with the Council's standard policy document structure.
- 7.2. It complements and should be used in conjunction with the Council's ICT Security Policy, Retention and Disposal Policy, Retention Schedules, Publication Scheme, CCTV Code of Conduct, and supporting internal procedures for information governance and data protection.
- 7.3. Other policy development follows on from this work, to ensure the Council is equipped with a comprehensive information governance policy suite to support its ongoing work.

8. Climate Change and Environmental Implications and considerations

- 8.1. NONE

9. Statutory and Legal Implications

- 9.1. The primary legislative framework is the UK GDPR, the DPA 2018 (as amended by the DUAA), and the DUAA itself. Section 103 of the DUAA

(inserting section 164A into the DPA 2018) creates a statutory obligation to have a published data protection complaints procedure in place by 19 June 2026.

- 9.2. The Council acts as data controller. Failure to comply with data protection legislation exposes the Council to enforcement action by the ICO, including fines of up to £17.5 million or 4% of annual global turnover (whichever is higher) for the most serious breaches, and to claims for compensation from affected individuals.
- 9.3. The Policy has been drafted by the DPO and reviewed by Legal Services.

10. Local Government Reorganisation Implications

- 10.1. The Council is engaged in local government reorganisation ("LGR") planning. The data protection obligations addressed by this Policy apply regardless of the LGR timeline. Compliance with the 19 June 2026 statutory deadline from the DUAA for a complaints procedure is not discretionary.
- 10.2. The DPO is engaged with LGR programme leads to ensure information governance arrangements are addressed within transition planning. Following the Secretary of State's "minded-to" decision, a future unitary West Norfolk Council will require new data protection policy arrangements to support its wider service remit.

11. Health and Safety Implications

- 11.1. NONE directly. The Policy's security provisions, including the obligation to report data breaches promptly, support the health and safety of individuals whose data the Council holds by minimising risks from unauthorised disclosure.

12. Consultees

- 12.1. The revised Policy has been developed by the DPO within Corporate Governance and reviewed by the Executive Leadership Team. The Leader of the Council has been briefed.
- 12.2. No trade union consultation is required as the Policy does not materially alter terms and conditions of employment, though the mandatory training requirements have been noted to HR.

13. Equality Impact Assessment

- 13.1. A pre-screening Equality Impact Assessment has been completed. No disproportionate negative impacts on any protected group have been identified. The Policy's data protection complaints procedure has been

designed to be accessible to all, with alternative submission routes (email, post, in-person via appointment with the DPO) supplementing the online complaint form to ensure no individual is excluded by reason of disability, language, or literacy. A full impact assessment is not required.

- 13.2. There is a need noted from CEWG review of the pre-screening below to ensure that all can access the relevant information and understand how to complain or receive assistance to complain under this policy. Suitable measures will be taken in this regard prior to the revised policy going live.

14. Risk Management Implications

- 14.1. The primary risk is failure to publish a compliant data protection complaints procedure by 19 June 2026, which would place the Council in breach of a statutory obligation and expose it to ICO enforcement. This risk is mitigated by Cabinet approval of the Policy at this meeting, with the complaint form and published procedure to follow by the statutory deadline.
- 14.2. A secondary risk is inadequate staff awareness of the new complaints procedure, leading to complaints not being recognised or escalated correctly. This is mitigated by the targeted training programme for IG Leads and customer-facing teams committed to in the Policy's objectives.
- 14.3. A third risk is that the ICO issues further guidance on complaints procedures following the 19 June 2026 commencement date that requires adjustments to the Council's approach. Recommendation 3 above addresses this by authorising the DPO to make non-material updates between review cycles.
- 14.4. Item S6 on the corporate risk register is intended to address ongoing information risk and its management.

15. Conclusion

- 15.1. The Data (Use and Access) Act 2025 places a hard statutory deadline of 19 June 2026 on the Council to have a published data protection complaints procedure in place. The revised Data Protection Policy 2026 meets that obligation, links to and underpins the Council's Corporate Strategy, updates the Council's data protection framework to reflect the current legal landscape, and restructures the Policy to align with the Council's standard document template.
- 15.2. Cabinet is asked to approve the Policy to enable implementation ahead of the statutory deadline.


LIST OF APPENDICES
Appendix A: Proposed Data Protection Policy 2026

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LIST OF BACKGROUND PAPERS
Data (Use and Access) Act 2025 ICO guidance: How to deal with data protection complaints (February 2026) Borough Council of King's Lynn & West Norfolk Corporate Strategy 2023–2027 Extant Data Protection Policy v0.03

PRE SCREENING EQUALITY IMPACT ASSESSMENT					
For equalities profile information please visit Norfolk Insight - Demographics and Statistics - Data Observatory					
Name of policy/service/function	Data Protection Policy 2026				
Is this a new or existing policy/service/function? (<i>tick as appropriate</i>)	New		Existing	<input checked="" type="checkbox"/>	
Brief summary/description of the main aims of the policy/service/function being screened. Please state if this policy/service is rigidly constrained by statutory obligations, and identify relevant legislation.	<p>This policy revision aligns with Corporate Strategy, introduces a process for data protection complaints, aligns with the KLWN policy template, and rationalises the policy making it easier to follow.</p> <p>There is a clear legal framework around the activities described, captured in the relevant sections of both the policy and the attendant Cabinet report.</p>				
Who has been consulted as part of the development of the policy/service/function? – new only (<i>identify stakeholders consulted with</i>)	n/a				
Question	Answer				
1. Is there any reason to believe that the policy/service/function could have a specific impact on people from one or more of the following groups, for example, because they have particular needs, experiences, issues or priorities or in terms of ability to access the service?		Positive	Negative	Neutral	Unsure
	Age			<input checked="" type="checkbox"/>	
	Disability			<input checked="" type="checkbox"/>	
	Sex			<input checked="" type="checkbox"/>	
	Gender Re-assignment			<input checked="" type="checkbox"/>	
	Marriage/civil partnership			<input checked="" type="checkbox"/>	

Please tick the relevant box for each group. NB. Equality neutral means no negative impact on any group. <i>If potential adverse impacts are identified, then a full Equality Impact Assessment (Stage 2) will be required.</i> <i>*For more information on health inequalities please visit The King's Fund</i>	Pregnancy & maternity			<input checked="" type="checkbox"/>	
	Race			<input checked="" type="checkbox"/>	
	Religion or belief			<input checked="" type="checkbox"/>	
	Sexual orientation			<input checked="" type="checkbox"/>	
	Armed forces community			<input checked="" type="checkbox"/>	
	Care leavers			<input checked="" type="checkbox"/>	
	Health inequalities*			<input checked="" type="checkbox"/>	
	Other (eg low income, caring responsibilities)			<input checked="" type="checkbox"/>	
Please provide a brief explanation of the answers above: This policy update has neutral impacts on the protected characteristics listed above, with the exception of people on lower incomes. Here, there is a moderate risk to equity of access to processes. Mitigating actions are discussed later in this pre-screening.					
Question	Answer	Comments			
2. Is the proposed policy/service likely to affect relations between certain equality communities or to damage relations between the equality communities and the Council, for example because it is seen as favouring a particular community or denying opportunities to another?	No	There is a moderate risk arising from equity of access to the processes under this policy that support data subjects' rights.			
3. Could this policy/service be perceived as impacting on communities differently?	No				
If 'yes' to questions 2 - 3 a full impact assessment will be required unless comments are provided to explain why this is not felt necessary: Decision agreed by EWG member:					
4. Are any impacts identified above minor and if so, can these be eliminated or reduced by minor actions? If yes, please agree actions with a member of the Corporate Equalities Working Group and list	Yes	Actions: Risk under question 2 is already mitigated through use of plain English, translation services and a variety of communication media. Access and routes to these will be clarified ahead of the policy go-live.			

agreed actions in the comments section		Actions agreed by EWG member:	
5. Is the policy/service specifically designed to tackle evidence of disadvantage or potential discrimination?	Yes	Please provide brief summary:	
Assessment completed by: Name	Tom Darling-Fernley		
Job title	Senior Corporate Governance Officer		
Date completed	29 April 2026		
Reviewed by EWG member	Alison Demonty 	Date	30 April 2026
<input checked="" type="checkbox"/> Please tick to confirm completed EIA Pre-screening Form has been shared with Corporate Policy (corporate.policy@west-norfolk.gov.uk)			
Revision 7			



Data Protection Policy

Owner	Data Protection Officer (Interim Corporate Governance Manager)		
Responsible Person	Senior Corporate Governance Officer		
Review Cycle	Two years, or on legislative change	Next Review Date	June 2028
Equality Impact Assessment (EIA) Date	29 Apr 2026	Date approved by the CEWG	30 Apr 2026
List any other impact assessments that have been completed	Not applicable		
Date approved by Cabinet			
Published to	Public		
Stakeholders consulted	Executive Leadership Team		

Revision Record		
Rev. No.	Date of Issue	Reason for Revision
1.00	May 2026	Adapting to Data (Use and Access) Act 2025 and aligning policy and procedure. Staffing changes.
0.05	Apr 2026	Rationalised bookmarks for accessibility.
0.04	Jun 2024	Cabinet approval of revised policy (11 Jun 2025 item CAB16).
0.03	Nov 2023	Review period.
0.02	Nov 2022	Review period / following UK GDPR.
0.01	May 2018	Introduction of GDPR.

Contents

1. Executive summary	2
Policy at a glance	
2. Introduction	2
3. Aims	4
4. Objectives	4
Objective 1: Establish a clear procedure for data protection complaints	
Objective 2: Improve performance on information governance requests	
Objective 3: Increase information governance competence and awareness	
Objective 4: Improve transparency, record keeping, and risk assessment	
5. Scope	7
6. Definitions	7
7. Legal framework and relevant legislation	9
8. Roles and responsibilities	12
9. Policy	15
Data protection principles	
Lawful basis for processing	
Data subject rights	
Data protection complaints	16
Freedom of Information and Environmental Information requests	
Information sharing	
Confidentiality, security and potential data breaches	17
Information risk management and data protection impact assessments	
Article 30 records of processing activity and information asset registers	18
Retention	
Contact details	
10. Governance arrangements and oversight	19
11. Additional information, guidance, and resources	20
12. Health implications	20
13. Environmental implications	20
14. Equality, diversity and inclusion	20
15. Associated documents	21
Appendix A: The Personal Data Protection Principles	22
Appendix B: Processing personal data	24
Conditions for processing special category data	25
Conditions for processing criminal offence data	26
Appendix C: Data Protection Impact Assessments	31

1. Executive summary

- 1.1. This Data Protection Policy sets out how the Borough Council of King's Lynn and West Norfolk ("the Council") collects, stores, uses and protects personal data. It applies to all Elected Members, officers, contractors and any person processing personal data on the Council's behalf.

Policy at a glance:

- Lays out four time-bound objectives for improving the Council's performance in relation to data protection and information governance.
- Defines the Council's approach to people's data rights under the relevant legislation – GDPR, Data Protection Act 2018 and Freedom of Information Act 2000.
- Links data protection and information governance to the Council's Corporate Strategy as a key enabling pillar.
- Sets out our tools and timescales for responding to requests.
- Sets out a clear process for data protection complaints under new legislation – the Data (Use and Access) Act 2025.
- Sets up a network of Information Governance Leads to support their teams and respective Information Asset Owners in their execution of this policy.

2. Introduction

- 2.1. This policy sits within the Council's broader corporate governance framework as referenced in the Corporate Strategy 2023–2027. The strategy places data protection alongside equality and climate change part of a foundational corporate plan that enables the delivery of four strategic priorities. This policy gives operational substance to that commitment.
- 2.2. Sound data stewardship underpins the Council's commitment to efficient and effective service delivery. The strategy sets out an ambition to provide information to residents, businesses and visitors in a timely and accessible manner, consult meaningfully with communities, and retain a skilled, trusted workforce. This requires disciplined handling of personal data.
- 2.3. Equally, the Council's drive to support communities involves processing sensitive personal data at scale. This policy ensures those activities are conducted lawfully, proportionately and with the dignity of residents at the fore.
- 2.4. The Council's operating principles of transparency, respect and collaborative working are only credible if the organisation can be trusted with people's

information. This policy establishes clear accountability, defined retention standards, and robust individual rights processes.

- 2.5. The Council supports the aims and provisions of the UK General Data Protection Regulation (“UK GDPR”) and the Data Protection Act 2018 (“DPA 2018”) and seeks to ensure compliance with same. It also lays out the Council’s response to the Digital (Use and Access) Act 2025 (“DUAA 2025”). The DUAA 2025 amends but does not replace the UK GDPR and the DPA 2018, and most of its data protection provisions came into force on 5 February 2026. The requirement for organisations to have a published data protection complaints procedure takes effect on 19 June 2026.
- 2.6. The Council is a data controller. The Council’s Electoral Services department is also a data controller. This Data Protection Policy applies to both and references to “the Council” throughout this policy are to both controllers.
- 2.7. Elected Members act in their role within the Council and where they do, this policy applies to them. At other times, elected Members are data controllers in their own right. In those circumstances, they will control and be accountable for how they implement the processing of data under the legislation.
- 2.8. **Compliance with this policy is mandatory.** Failure to comply may expose individuals to disciplinary action or personal criminal liability, and the Council to enforcement action by the Information Commission, financial penalties and reputational damage.

3. Aims

3.1. This policy aims to:

- help Elected Members, officers and other relevant persons meet their data protection obligations under relevant legislation;
- balance the Council's need to collect and process personal data with the rights of individuals to control their information and their privacy;
- set out the principles the Council applies when processing personal data to safeguard one of its most valuable assets and do so legally;
- establish and maintain a procedure for handling data protection complaints; and
- support the Council's wider corporate objectives through responsible, transparent information management.

4. Objectives

Objective 1: Establish a clear procedure for data protection complaints

4.1. The DUAA sets out a requirement to establish and maintain a procedure for handling data protection complaints.

In time for or starting from 19 June 2026, the Council will:

- Publish a data protection complaints procedure and an accessible electronic complaint form.
- Acknowledge all data protection complaints within 30 calendar days of receipt. Investigate all complaints without undue delay, keeping complainants informed of progress.
- Communicate the outcome of every complaint, including reasons and the complainant's right to escalate to the Information Commission.
- Maintain a central, structured log of complaints with clear investigation ownership and a focus on learning outcomes with attributed actions.
- Towards the end of the 2026-27 financial year, reflect on performance so far and refine procedures and quality targets for data protection complaints.

Objective 2: Improve performance on information governance requests

- 4.2. The Council seeks to improve the rate of on-time response to data subject access requests (DSARs), freedom of information requests (FOIRs), and reports of potential data breaches.

The Council will:

- Respond to DSARs and other data subject rights requests within one calendar month (extendable by two months for complex requests).
- Achieve a DSAR response-on-time rate of 90% by the end of September 2026, and 95% by the end of March 2027.
- Achieve an FOIR response-on-time rate of 95% by the end of September 2026.
- Achieve a potential data breach investigation response-on-time rate of 90% by the end of March 2027.
- Achieve an on-time rate of 100% for notifications of qualifying potential breaches to the Information Commission (according to their guidance) by the end of June 2026.

Objective 3: Increase information governance competence and awareness

- 4.3. Information governance sits within the Council's Corporate Governance team. Capacity in this team is finite, and there is a need to propagate and diffuse relevant knowledge and ownership throughout the organisation.

The Council will:

- Publish and maintain an e-learning module on data protection with mandatory refreshers for all officers and Elected Members on an annual basis. Target 95% completion within the first quarter of each financial year.
- Establish and embed a network of information governance leads ("IG Leads") in each service area of the Council.
- Support IG Leads to maintain their heightened awareness of information governance matters above the mandatory baseline for all officers and Members, to be the go-to contact points for all requests as relevant to their respective teams, and to maintain Article 30 records and information asset registers for their teams.
- Deliver targeted training for IG Leads and customer-facing teams on recognising and escalating data protection complaints, by 19 June 2026.

Objective 4: Improve transparency, record keeping, and risk assessment

- 4.4. The Council's Publication Scheme, Article 30 records, information asset registers, retention and disposal policies require review and alignment. Proactive appropriate disclosure of FOIA disclosures is deemed best practice.

The Council will:

- By the end of September 2026, consider updates to the Council's 2019 Publication Scheme and validate its alignment with the Information Commissioner's model scheme.
- By the end of September 2026, consider updates and realignment of the Council's policies, schedules and toolkit relating to data retention and disposal.
- Via the network of IG Leads, regularise the approach to Article 30 records and information asset registers on a team-by-team basis, and achieve updates and full compliance by the end of June 2026.
- Up-skill IG Leads through courses, seminars and discussion and develop suitable measures of this by the end of September 2026.
- Subject to suitable limits and exemptions, publish FOIR disclosures proactively via the Council's website (or other suitable platform) by the end of March 2027.
- Where proposed processing activities are high-risk, ensure that proposals to approvers are accompanied by a complete data protection impact assessment that has been reviewed and checked by the Data Protection Officer or their nominated representative.

5. Scope

5.1. This policy applies to:

- all employees of the Council: permanent, temporary or agency; past or current;
- elected Members, in exercising their Council role;
- contractors, consultants, partners, volunteers and others acting on behalf of the Council;
- council-owned companies and entities processing data on behalf of the Council; and
- data processors engaged by the Council under written contract.

5.2. It applies to all personal data processed by or on behalf of the Council, regardless of media (including but not limited to electronic, paper, audio or visual recordings, and non-corporate communications channels) and regardless of location.

5.3. In respect of personal data processed by officers or Elected Members for work purposes via personal means (be that via physical media, devices, accounts, non-corporate messaging platforms, or any other means), this information falls within the scope of UK GDPR and this policy. The Information Commission publishes [guidance on official information held in non-corporate communications channels](#).

6. Definitions

Article 30 record of processing activities – The mandatory record of data processing activities maintained by a data controller. For the Council, this is an aggregate of templated documents maintained on a per-service basis alongside an information asset register.

Consent – Permission by the data subject to process their personal data. The consent must be freely given, specific, informed, and unambiguous indication of the data subject's wishes by which he or she, by a statement, or by a clear affirmative action, signifies agreement to the processing of their personal data. Consent can be withdrawn at any time.

Criminal offence data – Information relating to a data subject's criminal convictions, offences, allegations, investigations or proceedings. Requires additional lawful basis for processing.

Data controller – The person who (either jointly or in common with other persons) determines the purposes for and the means in which any personal data is or are to be processed. NB: the Data Controller is usually a company or organisation and is not an individual within that company or organisation.

Data processor – Any third party that processes personal data on behalf of a data controller.

Data protection complaint – Any expression of dissatisfaction by a data subject about the way their personal data has been collected, used, stored, shared or otherwise processed. Covers DSAR/rights-request handling, data security (including breach impacts), accuracy, retention, and collection practices. Does not need to reference legislation to qualify.

Data subject – Any living individual who is the subject of personal data.

DSAR or data subject access request – A request made by an individual (or a person acting on their behalf) to know whether the Council holds their personal data and, if so, to receive a copy. The Council must respond within one calendar month, subject to identity verification and applicable exemptions under the DPA 2018.

DPIA or data protection impact assessment – A risk assessment prior to data processing that is likely to result in a higher risk to data subjects' rights and freedoms (UK GDPR Art. 35).

GDPR or UK GDPR – The United Kingdom General Data Protection Regulation. This is European Union law retained via the European Union (Withdrawal) Act 2018. It governs how personal data is handled in the UK.

Information asset register – A record maintained by each Directorate documenting the personal data it processes, including the purpose, lawful basis, retention period, and any third-party sharing arrangements. Maintenance of these records is a legal requirement under UK GDPR Article 30 and is the responsibility of the relevant Information Asset Owner.

Personal data – Any information relating to an identified or identifiable person. This includes information which can directly or indirectly identify the individual and can include name, identification number, location data, online identifier, or factors specific to the physical, physiological, genetic, mental economic, cultural, or social identity of that natural person.

Processing – Any treatment of personal data: it includes collecting, recording, organising, structuring storing, altering, retrieving, using, disclosing, sharing, making available as well as restricting, erasing, and destroying.

RoPA – See **Article 30 record of processing activities**

Special category data – Personal data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership, genetic data, biometric data, health data, or data concerning sex life or sexual orientation. Requires additional lawful basis for processing.

7. Legal framework and relevant legislation

- 7.1. The Council's data protection obligations arise from the following primary and secondary legislation.

**European Convention on Human Rights (“ECHR”)
Human Rights Act 1998 (“HRA”)**

- 7.2. The HRA translates the ECHR into UK law. ECHR Article 8 (right to respect for private and family life) underpins the Council's data protection obligations and must be considered wherever the Council's processing activities engage individuals' reasonable expectation of privacy.
- 7.3. The Council's compliance with UK GDPR and this policy is consistent with and supports its duties under the HRA.

**Data Protection Act 2018 (“DPA”) / European Union (Withdrawal) Act 2018
UK General Data Protection Regulation (“UK GDPR”)**

- 7.4. Together these set out the data protection principles and govern the processing of personal data in all formats. All personal data processed by or on behalf of the Council must comply with the six data protection principles; see **Appendix A: The Personal Data Protection Principles**.
- 7.5. Under UK GDPR Articles 13 and 14, individuals must be informed about how their data is used. Under Articles 15 to 22, data subjects have enforceable rights including subject access, rectification, erasure, restriction, objection, and rights relating to automated decision-making and data portability.
- 7.6. Processing must be based on one or more lawful bases and carried out fairly and transparently. Special category and criminal offence data require

additional conditions. See [Appendix B: Processing personal data](#) for the conditions around processing these categories of data.

- 7.7. Under Article 35 UK GDPR, the Council must carry out a Data Protection Impact Assessment (“DPIA”) before undertaking processing likely to result in high risk to individuals' rights and freedoms. This applies as part of the design and planning of new projects, policies, working practices, organisations, or other initiatives. See [Appendix C: Data Protection Impact Assessments](#) for further information on this process.
- 7.8. Under Article 28 UK GDPR, written contracts must be in place with all data processors, who may only be appointed where they can provide sufficient guarantees of compliance.
- 7.9. Under Articles 33 and 34 UK GDPR, personal data breaches likely to result in risk to individuals must be reported to the Information Commission within 72 hours. Where the risk is high, affected individuals must also be notified directly.

Data (Use and Access) Act 2025 (“DUAA”)

- 7.10. DUAA introduces new obligations including, at §103 (which inserts §164A into the DPA 2018), a statutory requirement for the Council to have a published data protection complaints procedure in place by 19 June 2026.

Freedom of Information Act 2000 (“FOIA”)

- 7.11. FOIA gives the public a right of access to recorded information held by public authorities, subject to defined exemptions. The Council must respond to requests within 20 working days and maintain and publish a model publication scheme.

Aarhus Convention

European Union (Withdrawal) Act 2018

Environmental Information Regulations 2004 (SI 2004/3391) (“EIRs”)

- 7.12. EIRs give the public a right of access to environmental information, with a stronger presumption in favour of disclosure than FOIA. Requests under the EIRs arise frequently across planning, environmental health, flood risk and waste services and are subject to the same 20 working day response obligation.

Communications Act 2003

Privacy and Electronic Communications (EC Directive) Regulations 2003 (SI 2003/2426) (“PECR”)

- 7.13. PECRs govern the use of electronic communications for marketing purposes and the use of cookies and similar tracking technologies. PECRs apply (for example) to the Council's commercial operations and to any Council-operated digital platforms that use non-essential cookies.

Regulation of Investigatory Powers Act 2000 (“RIPA”)

Telecommunications (Lawful Business Practice) (Interception of Communications) Regulations 2000 (SI 2000/2699) (“LBPRs”)

- 7.14. RIPA governs the lawful interception of communications and the use of covert surveillance by public authorities. The Council operates closed-circuit television (“CCTV”) and may in certain circumstances conduct directed surveillance in the exercise of its enforcement functions. Any such activity must be authorised in accordance with RIPA and the Council's CCTV Code of Conduct.
- 7.15. The LBPRs permit limited interception of business communications (such as monitoring of staff emails or calls) for defined lawful business purposes, subject to appropriate notice to users. [it policies]
- 7.16. The Council shares CCTV footage to support law enforcement agencies. Any disclosure of CCTV evidence must be made in accordance with a formal Service Level Agreement in line with UK GDPR and must not on an *ad hoc* basis outside its terms.

8. Roles and responsibilities

- 8.1. **All Elected Members, officers, and any persons holding or processing personal data on behalf of the Council have a role in implementing this policy.**
- 8.2. To help employees comply, the Data Protection Officer provides training and guidance documents. Corporate Governance provides day-to-day support for the organisation.
- 8.3. An e-learning module, Data Protection Essentials, is available on the Council's learning management system and is mandatory for all staff. Employees should familiarise themselves with this Policy and guidance, complete training and apply the provisions in relation to any processing of personal data.
- 8.4. Failure to comply with this policy could amount to misconduct, which can be a disciplinary matter and could ultimately lead to the dismissal of staff. Serious breaches could also result in personal criminal liability.
- 8.5. This policy continues to apply to individuals even after their relationship with the Council ends.

There are some officers who take on statutory or key roles:

Data Protection Officer (“DPO”)

- 8.6. The DPO has a degree of autonomy within the Council, and is responsible for advising the Council, including its senior Officers and elected Members, of its obligations under the legislation. The DPO is designated based on professional qualities and expert knowledge of data protection law and practice.
- 8.7. The DPO monitors compliance, raises awareness, and ensures training for staff to enable them to lawfully comply with processing operations. The DPO is the contact point with the Information Commission in the event of potential data breaches and other relevant matters.
- 8.8. The Council must provide the DPO with the necessary resources, professional development and access to personal data and processing operations to allow them to perform their role and to maintain their expert knowledge of data protection law and practice.
- 8.9. The Corporate Governance Manager is designated as the DPO and works within the Chief of Staff Directorate of the Council. They are supported in

dealing with requests and queries from data subjects by the Information Governance Officer and the Corporate Governance service area.

- 8.10. Please contact the DPO if you have any concerns of deviation from this policy or from the relevant legislation (see contact details on page 18 below).

Senior Information Risk Officer (“SIRO”)

- 8.11. The Chief Executive and Head of Paid Service is designated as the Council's SIRO and is accountable for the Council's information risk management. The SIRO delegates operational responsibility for data protection compliance and information risk control to the Data Protection Officer, who acts with the SIRO's authority.
- 8.12. The SIRO receives escalated information risk reports from Information Asset Owners to ensure that information risk is visible and considered at Cabinet level.

Information Asset Owners (“IAOs”)

- 8.13. Each Assistant Director in the Council is an IAO, accountable for compliance with this policy for their respective Directorates and the maintenance of compliant records.
- 8.14. IAOs are also accountable for the management and timely disposal of records in compliance with published data retention schedules applicable to their Directorates and Service Areas.
- 8.15. IAOs report escalated information risks to the SIRO. They are supported day-to-day by Information Governance Leads within their teams.

Information Governance Leads (“IG Leads”)

- 8.16. IG Leads maintain heightened awareness of information governance matters above the mandatory baseline for all officers. They are operationally responsible for the duties of Information Asset Owners with their support and guidance and act as primary contacts for all requests as relevant to their respective teams.
- 8.17. IG Leads ensure operational compliance with this policy for their respective Directorates and are accountable for the maintenance of compliant Article 30 records of processing activity and information asset registers.

Information Governance Officer (“IGO”)

- 8.18. The IGO supports the Data Protection Officer in ensuring the Council is compliant with all relevant legislation and regulatory frameworks. They liaise with Directorates and Service Areas primarily via Information Governance Leads to ensure compliance. They are responsible for processing, recording and facilitating responses to requests and notifications under the relevant legislation, and liaising as necessary with the Information Commission.
- 8.19. Please contact the IGO in the first instance with questions about the operation of this policy or the relevant legislation (see contact details on page 18 below).

Information Commission (“Commission”)

Note: Under the Data (Use and Access) Act 2025, the Information Commissioner as a “corporation sole” will be replaced by an Information Commission constituted as a board with a non-executive chair. This change was imminent at the time of writing. This policy refers throughout to the Information Commission and should be read as referring to both terms.

- 8.20. As the independent regulator responsible for enforcing the relevant legislation, the Commission has broad investigatory and corrective powers. It can issue fines, enforcement notices and, in serious cases, prosecute individuals who commit criminal offences under the DPA 2018.
- 8.21. The Council is required to register with and pay the applicable fee to the Commission annually. Officers and Members must be aware that non-compliance may expose both the Council and individuals personally to regulatory action.
- 8.22. People who are unsatisfied with the Council’s responses to any data protection complaint or requests under the relevant legislation are entitled in law to escalate their issues to the Commission.

Web: ico.org.uk

Telephone: **0303 123 1113** (Mon to Fri 9am to 5pm)

Post: Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF
(note: this office will relocate to Manchester in Autumn 2026)

9. Policy

Data protection principles

- 9.1. All personal data processed by or on behalf of the Council must comply with the six data protection principles set out in UK GDPR Article 5. See [The Personal Data Protection Principles](#)
- 9.2. for details of the principles.

Lawful basis for processing

- 9.3. Processing must be based on at least one lawful basis under UK GDPR Article 6.
- 9.4. Processing of special category data requires an additional condition under Article 9. Processing of criminal offence data requires an additional condition under Article 10 and, in most cases, Schedule 1 of the DPA 2018. Both the lawful basis and any additional condition must be identified and documented before processing commences.
- 9.5. See [Appendix B: Processing personal data](#) for details of the lawful bases and the additional conditions and schedules.

Data subject rights

- 9.6. The Council will facilitate all data subject rights under UK GDPR Articles 15 to 22, including subject access, rectification, erasure, restriction, objection, and rights in relation to automated decision-making and data portability.
- 9.7. Rights requests must be acknowledged promptly and responded to within one calendar month, extendable by two months for complex or numerous requests. Any extension or refusal must be reasoned and must inform the requestor of their right to complain.
- 9.8. For further guidance, contact the Information Governance Officer (see contact details on page 18 below).

Data protection complaints

- 9.9. The Council operates a published data protection complaints procedure in accordance with DPA 2018 §164A. A data protection complaint is any expression of dissatisfaction about how the Council has handled personal data; it does not need to reference legislation to qualify.

The Council will:

- acknowledge every complaint within 30 calendar days of receipt;
 - investigate without undue delay and keep the complainant informed;
 - communicate the outcome with reasons and advise the complainant of their right to escalate to the Information Commission; and
 - log all complaints centrally with clear ownership, outcomes, and learning actions.
- 9.10. Complaints may be submitted in any form. Complaints received through any channel are valid and must be escalated to the DPO without delay. See contact details below.
- 9.11. Individuals who remain dissatisfied after receiving the Council's outcome may refer their complaint to the Information Commission (see contact details on page 14 under roles and responsibilities).

Freedom of Information and Environmental Information requests

- 9.12. The Council will meet its obligations under FOIA and the EIRs to respond to all valid requests within 20 working days, subject to applicable exemptions and exceptions. See contact details on page 18 below.
- 9.13. Requests will be handled without knowledge of the applicant's identity or their purpose in seeking the information.
- 9.14. The Council will proactively publish disclosures and maintain its publication scheme in accordance with its publication scheme.

Information sharing

- 9.15. Personal data may only be shared with third parties where there are a lawful basis and a legitimate purpose. International transfers outside the UK require an adequacy decision, appropriate safeguards, or a recognised exception.

Confidentiality, security and potential data breaches

- 9.16. Officers and Members must not access, copy, alter, or disclose personal data except as authorised by their role and relevant legislation. The Council's ICT Security Policy applies to all electronic personal data.
- 9.17. A personal data breach is any accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data. On discovery of a potential breach, the reporting officer must notify the Corporate Governance team without delay via the incident form under 9.20 above. The Data Protection Officer or their nominated delegate will investigate the potential breach and assess severity.
- 9.18. Under UK GDPR Article 33, breaches likely to result in risk to individuals' rights and freedoms must be reported to the Information Commission within 72 hours. Under Article 34, where the risk is high, affected data subjects must also be notified directly.
- 9.19. All breaches will be logged and recommendations arising from investigations reported quarterly.
- 9.20. Suspected weaknesses or potential breaches must be reported without delay to the Corporate Governance team. Officers and elected Members should use the designated internal reporting eform. Members of the public should contact the Data Protection Officer or another Council officer who can pass the issue on (see contact details on page 18 below).

Information risk management and data protection impact assessments

- 9.21. Under UK GDPR Article 35, prior to commencing any processing likely to result in high risk to data subjects' rights and freedoms, a data protection impact assessment must be completed and reviewed by the Data Protection Officer.
- 9.22. Privacy by design must be embedded from the outset of any new project, system, or policy. Screening questions and templates are available to all officers. See [Appendix C: Data Protection Impact Assessments](#) for further information and guidance.

Article 30 records of processing activity and information asset registers

- 9.23. The Council maintains records of its processing activities as required by UK GDPR Article 30. Information Asset Owners are accountable for ensuring their respective Directorate's Article 30 records and information asset registers are accurate and current.
- 9.24. Records are operationally maintained by Information Governance Leads and reviewed in accordance with the timetable set by the Data Protection Officer.

Retention

- 9.25. Personal data is retained only for as long as necessary and in accordance with the Council's Data Retention Policy and accompanying data retention schedules.
- 9.26. The Council's privacy notices, published on its website, inform individuals of how their data is used and for how long.
- 9.27. See [section 15 Associated documents](#) for further information.

Contact details

- 9.28. The Data Protection Officer and Information Governance Officer can be reached using these contact details:

Borough Council of King's Lynn and West Norfolk
Kings Court, Chapel Street, King's Lynn PE30 1EX

Telephone: **01553 616200**

Email for freedom of information and environmental information requests:
freedom.information@west-norfolk.gov.uk

Email for all other information governance matters:
data.protection@west-norfolk.gov.uk

10. Governance arrangements and oversight

Performance reporting

- 10.1. The Data Protection Officer (DPO) will compile an annual performance report on Information Governance and Data Protection to the Council's Corporate Performance Panel. This will be alongside regular updates to the Council's Executive Leadership Team.

Designation of key personnel

- 10.2. The DPO role will normally be fulfilled by a suitably qualified member of the paid service as part of a wider remit. It will be the task of the supervising Assistant Director or Executive Leadership Team member to designate the DPO clearly in the relevant job description and to confirm the appropriate seniority for the post through the Council's job evaluation process.
- 10.3. The Data Protection Officer will identify and designate a Deputy Data Protection Officer (DDPO) to provide cover for leave and routine absences. The DDPO will be suitably trained to act on behalf of the DPO, with a route of escalation to the Senior Information Risk Officer (SIRO) or their nominated deputy.
- 10.4. Should the DPO be unavailable for an extended period, the SIRO will determine what contingency arrangements fit the circumstances.

Policy review mechanism

- 10.5. This policy will be reviewed every two years, or at the time of legislative or major organisational change, whichever is sooner.

11. Additional information, guidance, and resources

Guidance from the Information Commission

The Information Commission is the independent regulator responsible for enforcing relevant legislation around people's data rights in the United Kingdom. It has broad investigatory and corrective powers.

Its website gives a broad range of guidance for both individuals and organisations, as well as details of how to escalate issues to the Commission. ico.org.uk/for-the-public/

Information on the Council's website

The Council's web page on Data Protection gives information about our commitment and individuals' rights, as well as contact details and links to relevant request forms:

west-norfolk.gov.uk/info/20006/council_and_democracy/326/data_protection

The web page on Freedom of Information sets out our commitment to the legislative requirements, our publication scheme, how to seek an internal review of our response, and relevant contact details.

west-norfolk.gov.uk/info/20006/council_and_democracy/327/freedom_of_information

12. Health implications

- 12.1. No explicit health implications arise from this policy.

13. Environmental implications

- 13.1. No explicit environmental implications arise from this policy.

14. Equality, diversity and inclusion

- 14.1. The effects of this policy on protected characteristics defined in law, as well as further in the Council's policies, are neutral.
- 14.2. The small risk to equity of access to these provisions is mitigated through use of multiple channels (e.g. eforms, email, mail, phone, in-person appointments), plus use of translation services and supported guidance.

- 14.3. A pre-screening equalities impact assessment was included in the report submitting this policy to Cabinet (meeting date 9 June 2026 reference CAB12).

15. Associated documents

- 15.1. This policy is part of a suite of policies and procedures that should be used in conjunction with each other. Key linkages are with the following associated documents:

- Privacy Notice and associated departmental policies
west-norfolk.gov.uk/privacy
- Data Retention and Disposal Policy and departmental schedules
west-norfolk.gov.uk/downloads/download/820/data_retention_and_disposal_policies
- Freedom of Information Publication Scheme
west-norfolk.gov.uk/downloads/download/617/freedom_of_information
- ICT Security Policy (internal)
- ICT Computer Usage Policy (internal)

Appendix A: The Personal Data Protection Principles

UK GDPR Article 5 requires us to abide by a set of six data protection principles:

A1. Lawfulness, fairness and transparency

Processing must have a valid lawful basis; must not deceive or harm the data subject; and individuals must be informed about how their data is used in clear, accessible terms.

Example: A housing benefits team processes applicants' financial data under the lawful basis of legal obligation (Housing Benefit Regulations 2006). The service's privacy notice, published on the Council's website and available in the benefits office, sets out in plain English what data is collected, why, and how long it is kept.

A2. Purpose limitation

Data collected for one specified purpose must not be used for a different, incompatible purpose without a fresh lawful basis or the data subject's consent.

Example: Contact details collected by the Council's leisure centre for membership administration must not be passed to the planning department to consult residents on a nearby development without separate authority to do so.

A3. Data minimisation

Only data that is adequate, relevant, and limited to what is necessary for the purpose should be collected and held.

Example: An environmental health officer investigating a noise complaint needs the complainant's contact details and address, but not their date of birth, employment status, or other personal details that play no part in investigating the complaint.

A4. Accuracy

Personal data must be accurate and, where necessary, kept up to date. Inaccurate data must be corrected or erased without delay.

Example: A resident notifies the Council that they have moved house. The Council tax, housing register, and any other relevant service records must be updated promptly. Holding an old address across multiple systems risks incorrect billing, missed correspondence, and potential enforcement action against the wrong person.

A5. Storage limitation

Personal data must not be kept in a form that identifies individuals for longer than is necessary for the purpose for which it was collected.

Example: Planning application files contain personal data about applicants and objectors. Once an application is determined and any appeal period has elapsed, personal data that is no longer needed for legal or administrative purposes should be reviewed against the Council's Retention and Disposal Policy and disposed of securely, not retained indefinitely simply because storage is cheap.

A6. Integrity and confidentiality (security)

Personal data must be processed securely, with appropriate technical and organisational measures to protect against unauthorised or unlawful processing, and against accidental loss, destruction, or damage.

Example: A licensing officer emailing a list of personal licence holders to an external contractor must use secure transfer methods and must not send unencrypted personal data to a personal email address. Physical files containing enforcement records must be stored in locked cabinets and not left unattended in open-plan areas or vehicles.

A7. Accountability

A seventh overarching obligation, accountability, requires the Council to be able to demonstrate compliance with all the above principles. This is addressed through this policy, the Council's Article 30 records, staff training, DPIAs, and governance reporting arrangements.

Appendix B: Processing personal data

B1. Lawful bases for processing personal data

The basis for processing personal data must be lawful. At least one of the following bases under UK GDPR Article 6 must apply whenever the Council processes personal data:

- **Consent:** the individual has given clear consent for the Council to process their personal data for a specific purpose. Consent can be withdrawn at any time.
- **Contract:** the processing is necessary for a contract the Council has with the individual, or because they have asked the Council to take specific steps before entering a contract.
- **Legal obligation:** the processing is necessary for the Council to comply with the law.
- **Vital interests:** the processing is necessary to protect the vital interests of the data subject or another person.
- **Public task:** the processing is necessary for the Council to perform a task in the public interest or for its official functions, and the task or function has a clear basis in law.
- **Legitimate interests:** note that this basis cannot be used for processing carried out by public authorities in the performance of their tasks.

B2. Appropriate policy document (DPA 2018 Schedule 1, Part 4)

The Data Protection Policy and this appendix to it serve as the Appropriate Policy Document (“APD”) for the purposes of Schedule 1, Part 4 of the Data Protection Act 2018. It is required where the Council processes special category data or criminal offence data under a Schedule 1 condition.

The Council's operational needs to process special category and criminal offence data are perpetual in nature. This Policy, including this Appendix, will be retained for as long as these processing activities continue and for a minimum of six months after any relevant processing activity permanently ceases. Superseded versions of this Policy will be retained for six months following replacement.

B3. Conditions for processing special category data

Special category (“SC”) data is personal data that warrants extra protection by reason of its sensitivity. Under UK GDPR Article 9, SC data comprises personal data revealing:

- racial or ethnic origin
- political opinions
- religious or philosophical beliefs
- trade union membership
- genetic data
- biometric data processed to uniquely identify a person
- data concerning health
- data concerning a person's sex life
- data concerning a person's sexual orientation

To process special category data, the Council must identify and document both a lawful basis under Article 6 (above) and a separate condition under Article 9. The conditions under Article 9 are:

- Explicit consent of the data subject
- Necessary for employment, social security or social protection law (requires an APD and, in most cases, an Appropriate Policy Document condition under Schedule 1 DPA 2018)
- Necessary to protect the vital interests of the data subject or another person where the data subject is physically or legally incapable of giving consent
- Processing by a not-for-profit body in the course of its legitimate activities, relating only to members or former members or persons with regular contact with the body
- Personal data manifestly made public by the data subject
- Necessary for the establishment, exercise or defence of legal claims
- Necessary for reasons of substantial public interest (requires an APD)
- Necessary for preventative or occupational medicine, medical diagnosis, health or social care, or management of health or social care systems (requires an APD)
- Necessary for public health purposes (requires an APD)
- Necessary for archiving in the public interest, scientific or historical research, or statistical purposes (requires an APD)

A DPIA must be completed and documented where the processing of special category data is likely to result in high risk to data subjects.

B4. Conditions for processing criminal offence data

Criminal offence (“CO”) data is personal data relating to criminal convictions, offences, allegations, investigations, or proceedings, including unproven allegations, information relating to the absence of convictions, and data relating to victims and witnesses. It also covers related security measures: penalties, conditions or restrictions imposed as part of the criminal justice process, and civil measures which may lead to a criminal penalty.

To process criminal offence data, the Council must identify and document both a lawful basis under Article 6 and either official authority under Article 10, or a separate condition under Schedule 1 of the DPA 2018.

As a public authority, the Council must identify the specific statutory provision conferring official authority where it relies on that basis. Where official authority is not applicable, the relevant Schedule 1 condition must be identified. The Schedule 1 conditions most likely to be relevant to a district council include:

- Employment, social security, and social protection (para. 1)
- Health or social care purposes (para. 2)
- Public health (para. 3)
- Research (para. 4)
- Statutory and government purposes (para. 6)
- Administration of justice and parliamentary purposes (para. 7)
- Preventing or detecting unlawful acts (para. 10)
- Protecting the public against dishonesty (para. 11)
- Regulatory requirements relating to unlawful acts and dishonesty (para. 12)
- Preventing fraud (para. 14)
- Suspicion of terrorist financing or money laundering (para. 15)
- Safeguarding of children and individuals at risk (para. 18)
- Elected representatives responding to requests (para. 23)
- Disclosure to elected representatives (para. 24)
- Legal claims (para. 33)
- Insurance (para. 37)

A DPIA must be completed and documented where the processing of criminal offence data is likely to result in high risk to data subjects.

B5. How the Council secures compliance with the data protection principles when processing SC and CO data

Pursuant to Schedule 1, Part 4, paragraph 39(2)(a) of the DPA 2018, the Council applies the following measures when processing special category or criminal offence

data, in addition to its general compliance framework set out in this Policy and Appendix A:

- a) **Governance and authorisation.** Processing of SC or CO data must be documented in the relevant Directorate's Article 30 record before it commences. The lawful basis, Article 9 condition or Schedule 1 condition, and (where required) the Appropriate Policy Document condition must all be identified and recorded. Where a new processing activity is proposed, this must be approved by the IAO for the relevant Directorate and reviewed by the DPO.
- a) **Privacy by design and DPIAs.** Where proposed processing of SC or CO data is likely to result in high risk to data subjects' rights and freedoms: as is commonly the case given the sensitivity of these categories: a DPIA must be completed and signed off by the DPO before processing commences. See Appendix C.
- b) **Access controls.** Access to SC and CO data is restricted to officers with a legitimate need to process it in the performance of their duties. Access rights are managed through the Council's ICT systems and reviewed periodically. Physical files containing SC or CO data are stored securely and accessible only to authorised staff.
- c) **Staff training.** All officers are required to complete the mandatory data protection e-learning module, which covers the additional obligations applicable to SC and CO data. Officers in services that routinely process SC or CO data: including housing, environmental health, licensing, revenues and benefits, and HR: receive additional awareness as part of service induction and periodic briefing by IG Leads.
- d) **Data sharing.** SC and CO data is shared with third parties only where there is a clear lawful basis, a legitimate purpose, and (where required) a written data sharing agreement or data processing agreement. Disclosures are made only to those with a legal entitlement to receive the data. Ad hoc disclosures outside agreed frameworks are not permitted.
- e) **Minimisation and pseudonymisation.** The Council applies data minimisation to SC and CO data as a matter of course: only data that is necessary for the specific purpose is collected and retained. Where feasible, pseudonymisation or anonymisation techniques are applied, particularly in research, reporting, and analytical contexts.
- f) **Breach response.** Breaches involving SC or CO data are treated as higher priority in the Council's breach assessment process, given the greater

potential for harm to data subjects. The DPO will consider whether Information Commission notification and direct subject notification are required on the facts of each breach.

B6. Retention of special category and criminal offence data

This section satisfies the requirement under Schedule 1, Part 4, paragraph 39(2)(b) DPA 2018.

Personal data, including special category and criminal offence data, is retained only for as long as is necessary for the purpose for which it was collected. The Council's departmental retention schedules, published on the Council's website, are the authoritative source for retention periods and must be consulted by officers and IG Leads in respect of specific record types.

The following sets out the Council's principal processing activities involving SC or CO data and the schedule in which the applicable retention periods are found.

Special category data

Processing activity	Data types	Schedule and reference
Housing options, homelessness assessment and prevention	Health and medical information, vulnerability and occupational support needs assessments, carer information, MARAC and MAPPA information	HWPP4.1.1 HWPP4.1.2
Housing standards enforcement, disrepair, harassment and illegal eviction, housing assistance and grants	Health and medical information	HWPP4.2.1 HWPP4.2.2 HWPP4.2.7
Unauthorised encampments	Health and medical information	HWPP4.2.5
Care and Repair: Disabled Facilities Grants and Handy Person Scheme	Health and medical information	HWPP2.1.1 HWPP2.1.2
Careline Community Alarm and associated services	Health and vulnerability data	HWPP3.1.1
Environmental health: accidents and injuries involving adults	Health data	HWPP6.5.1
Environmental health: accidents and injuries involving children	Health data	HWPP6.5.2

Processing activity	Data types	Schedule and reference
Benefits assessment, payment and fraud investigation	Medical forms, health and financial vulnerability data	R2.1.1 to R2.1.13
Personnel and payroll: all employees	Health and medical information, trade union membership, occupational health, DBS records, equality monitoring, safeguarding referrals	CS5.1 to CS5.13
Licensing: hackney carriage, private hire drivers and operators	Medical information, right to work	CE4.1.9 CE4.2.1 CE4.2.2
Standards: investigation of complaints about conduct of councillors	Personal appearance and behaviour, political affiliation and opinions, health information	CE3.10.1
Customer Information Centre data collection for housing, care, licensing and community safety services	Health and financial data	CS2.1.3 to CS2.1.8
Communications: photographs	Images of identifiable individuals	CS1.1.2

Criminal offence data

At the time of writing (April 2026), the Council's departmental retention schedules do not systematically distinguish criminal offence data as a distinct category. The schedules address records that contain CO data, including community safety, enforcement, prosecution, licensing and fraud investigation records. However, these are treated within a general framework that does not explicitly engage with the additional requirements applicable to CO data under UK GDPR Article 10 and Schedule 1 DPA 2018.

This is a known gap to be addressed as part of the planned review of the Data Retention Policy and departmental schedules. In the interim, the following schedule entries cover the record types most likely to contain CO data:

Processing activity	Data types	Schedule and reference
Community safety, ASB case management, waste enforcement, service of notices, prosecution of cases, injunctions and other ASB interventions	Criminal records, offence and conviction data, case evidence	HWPP1.1.1 to HWPP1.1.7
Unauthorised encampments	Criminal records	HWPP4.2.5

Processing activity	Data types	Schedule and reference
Health and safety enforcement notices	Offence and prosecution data	HWPP6.1.1
Benefits fraud investigation: no fraud established or no further action	Investigation records, interview records	R2.1.8 R2.1.9
Benefits fraud investigation: sanction applied (caution, administrative penalty or prosecution)	Conviction and sanction data, interview records	R2.1.10
Benefits fraud investigation: prosecution resulting in acquittal	Offence and acquittal data, evidence	R2.1.11
Benefits fraud: QB50 notebooks	Investigation notes	R2.1.12
Internal audit: investigation resulting in caution	Offence and caution data	R3.1.8
Internal audit: investigation resulting in administrative penalty	Penalty and offence data	R3.1.9
Internal audit: investigation resulting in prosecution	Conviction data	R3.1.10
Internal audit: RIPA surveillance records	Surveillance and intelligence data	R3.1.12
Licensing: hackney carriage, private hire drivers and operators (refusals, revocations and suspensions)	Criminal record data, conviction history	CE4.1.9 CE4.2.1 CE4.2.2
Licensing: licensing hearings generally	Convictions, criminal background data	CS4.3.8
RIPA authorisations: revenues and benefits	Surveillance records	R2.1.2
RIPA authorisations: legal	Surveillance records, observation logs, authorisations	CE3.5.1
Standards: investigation of complaints about conduct of councillors	Offences, alleged offences	CE3.10.1

General principles

Regardless of the specific period applicable to a record type, SC and CO data must be reviewed at the end of the applicable retention period and erased promptly unless a statutory obligation, legal proceedings, or a legitimate operational need requires continued retention. Erasure must be carried out securely in accordance with the Council's Data Retention Policy. IAOs are accountable for ensuring their Directorate's schedules adequately address SC and CO data as distinct categories and must treat any unresolved or outstanding schedule entries as an open compliance risk requiring prompt resolution.

Appendix C: Data Protection Impact Assessments

C1. Introduction

Under GDPR, there is an obligation for organisations, in their role as data controllers, to conduct a data protection impact assessment (“**DPIA**”) before undertaking any processing that presents a specific privacy risk by virtue of its nature, scope or purpose.

Article 35 of GDPR introduces the formal requirement for a DPIA and it can best be described as a type of risk assessment which is carried out prior to a new processing activity, to highlight the viability of carrying out such a process and identifying any risks that may be associated with the processing.

C2. When is a DPIA required?

Article 35 sets out the circumstances where a DPIA is required and states:

“Where a type of processing in particular using new technologies, and taking into account the nature, scope, context and purposes of the processing, is likely to result in a high risk to the rights and freedoms of natural persons, the controller shall, prior to the processing, carry out an assessment of the impact of the envisaged processing operations on the protection of personal data. A single assessment may address a set of similar processing operations that present similar high risks.”

Although GDPR does not specifically state what must be covered by a DPIA, Article 35(7) sets out the following minimum requirements that should be considered:

- A systematic description of the proposed processing operations
- The purposes of the processing
- The legitimate interest pursued by the controller
- An assessment of the necessity and proportionality of the processing operations in relation to the purposes.
- An assessment of the risks to the rights and freedoms of data subjects
- The measures envisaged to address the risks, including appropriate: safeguards, security measures and mechanisms to ensure the protection of personal data and to demonstrate compliance considering the rights and legitimate interests of data subjects and other persons concerned.

C3. When is a DPIA not required?

The GDPR doesn’t specifically state when a DPIA is not required, but there is significant guidance which can be relied upon when deciding whether a DPIA is

required or not. From this guidance several circumstances have been identified where a DPIA is not required. These are:

- Where processing is low risk (i.e. not likely to result in a high risk to the rights and freedoms of natural persons).
- Where a DPIA has already been carried out and the nature, scope, context, and purposes of the processing are very similar to the proposed processing.
- Where a processing operation has a legal basis in EU or Member State law and has stated that an initial DPIA does not have to be carried out, where the law regulates the specific processing operation and where a DPIA, according to the standards of the GDPR, has already been carried out as part of the establishment of that legal basis.
- Where the processing is included on the optional list (established by the INFORMATION COMMISSION) of processing operations for which no DPIA is required

The Information Commission publishes a useful guide on Data Protection Impact Assessments on its website:

ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/accountability-and-governance/data-protection-impact-assessments-dpias/

Templates and screening questions to ascertain the need for a DPIA are published for staff on the Council's intranet. The screening questions are based on Information Commission guidance.

C4. Action Plan

These are a few points that you should consider when looking at DPIAs and whether you feel it is necessary to carry out an assessment:

- Be aware of the data you / your department processes and regularly assess whether this is due to change.
- If your department has been tasked with a new exercise, go through the screening questions on the template DPIA to determine whether you need to carry out the assessment.
- Look for any potential risk factors associated with the data you process and determine whether an assessment is needed.

POLICY REVIEW AND DEVELOPMENT PANEL REPORT

REPORT TO:	Corporate Performance Panel		
DATE:	3 rd June 2026		
TITLE:	Health and Safety Policy and Statement of Intent		
TYPE OF REPORT:	Cabinet Report		
PORTFOLIO(S):	Leader, Councillor Beales		
REPORT AUTHOR:	Mark Whitmore		
OPEN/EXEMPT	Open	WILL BE SUBJECT TO A FUTURE CABINET REPORT:	Yes

REPORT SUMMARY/COVER PAGE

PURPOSE OF REPORT/SUMMARY:
Members are directed to the attached report for the purpose and summary.
KEY ISSUES:
Members are directed to the attached report for full details of the key issues.
OPTIONS CONSIDERED:
Members are directed to the attached report for full details of the options.
RECOMMENDATIONS:
To consider the report and make any appropriate recommendations to Cabinet.
REASONS FOR RECOMMENDATIONS:
To scrutinise recommendations being made for an executive decision.



REPORT TO CABINET

DATE OF MEETING	9 th June 2026
REPORT TITLE	Health, Safety & Welfare Policy
LEAD MEMBER	Councillor Beales
LEAD OFFICER	Mark Whitmore
CONSULTEES	Corporate H&S Board, ELT
WARDS AFFECTED	None

KEY DECISION	YES/NO
DECISION MAKER	Cabinet Recommendations to Council Part Cabinet Decision and Part Recommendations to Council Other Council Body
IS THE REPORT OPEN OR EXEMPT	OPEN/EXEMPT

FINANCIAL IMPLICATIONS	YES/NO
HR IMPLICATIONS	YES/NO
POLICY IMPLICATIONS	YES/NO
STATUTORY IMPLICATIONS	YES/NO
RISK MANAGEMENT IMPLICATIONS	YES/NO
ENVIRONMENTAL IMPLICATIONS	YES/NO
EQUALITY IMPACT ASSESSMENT COMPLETED	CONFIRM PRE-SCREEN COMPLETED AND IF FULL EIA REQUIRED AND COMPLETED

SUMMARY OF REPORT

The council recognises the importance of ensuring the Health, Safety and Welfare of its employees and members of the public using our buildings and public open spaces. Providing safe working environments is more than just meeting statutory obligations it is also essential to the councils Marmot ambitions, specifically of creating fair employment and good work for all and building healthy and sustainable places and communities.

The policy sets out the arrangements, duties and responsibilities of the council to its staff, the responsibilities of all staff to adhere to the Policy requirements and how these duties and responsibilities will be discharged.

RECOMMENDATIONS

Recommendation to Full Council:

1. To approve the adoption of the Health, Safety & Welfare Policy.
2. To delegate responsibility for approving annual administrative reviews to the Chief of Staff.
3. To note that the policy where significant changes to the policy are made that these will be brought back to council for approval.

REASON FOR DECISION

To ensure that the council has an effective structure for delivering its health and safety functions.



CORPORATE STRATEGY How does this proposal support our Corporate Priorities Our priorities Corporate Strategy 2023 - 2027 Borough Council of King's Lynn & West Norfolk	
Promote growth and prosperity to benefit West Norfolk	
Protect our Environment	
Efficient and effective delivery of our services	The Policy supports the council to deliver its services safely.
Support our communities	

REPORT DETAIL

1. Introduction

- 1.1 The Health & Safety at Work etc Act 1974 requires the council to *“prepare and as often as may be appropriate revise a written statement of his general policy with respect to the health and safety at work of his employees and the organisation and arrangements for the time being in force for carrying out that policy, and to bring the statement and any revision of it to the notice of all of his employees.”*
- 1.2 The proposed policy has been subject to consultation with the Councils Health & Safety Board, which includes Unison and the Corporate Leadership Team.

2. Background

- 2.1 Following a detailed review of the council’s corporate health and safety arrangements a full review of the councils policy has been undertaken. Following this a new policy has been developed that provides a clear and concise description of the councils arrangements. This is in line with the Health & Safety Executive’s guidance on preparing a written statement.



3. Proposal

- 3.1 It is proposed the new Health, Safety & Welfare Policy is adopted by the council.

4. Options Considered

- 4.1 No other options have been considered as there is a legal requirement to have a written policy and statement of general intent.

5. Financial Implications

- 5.1 Whilst there is no direct financial implications with the adoption of the policy it should be noted that the policy states, in line with legal requirements, that the financial implications of ensuring compliance with health and safety obligations is not in itself a reasonable excuse for not undertaking appropriate steps to comply with the law.

6. HR Implications

- 6.1 As part of the review of the councils Health & Safety functions there is an ongoing review of resource and staffing requirements to ensure that the Council has sufficient resource to meet the legal requirements.

7. Policy Implications

- 7.1 The proposed policy sets out the councils commitment and approach to managing health and safety. The requirements of the policy should be considered when formulating or reviewing other council policies.

8. Climate Change and Environmental Implications and considerations

- 8.1 Not applicable to this report.

9. Statutory and Legal Implications

- 9.1 The council has a legal obligation to have a written policy and statement of intent. The council is also required to comply with all Health & Safety law as it applies to the business of the organisation.

- 9.2 As per the scheme of delegation within the constitution it is a requirement that this policy is reviewed and approved by Council, this report therefore meets that obligation.

10. Local Government Reorganisation Implications

- 10.1 Not applicable to this report.

11. Health and Safety Implications



11.1 The policy addresses the organisational duties and arrangements for ensuring the health and safety of its employees and visitors to its operational land.

12. Consultees

12.1 The consultees for this policy were the Health & Safety Board, the Executive Leadership Team and the Leader of the Council.

13. Equality Impact Assessment

13.1 Pre screening assessment completed and attached to this report.

14. Risk Management Implications

14.1 The proposed policy will affect how the council identifies and manages risk against which the risks identified in the strategic risk register and service risk registers will be assessed against.

15. Conclusion

15.1 The report sets out the legislative requirements for the council to have a written health and safety policy and statement of general intent. The proposed policy, attached at appendix 1, meets these legal requirements, clearly setting out how health and safety will be managed within the council.

15.2 Whilst there are no direct financial or HR implications attached to the adoption of the policy the report outlines that financial considerations alone are not sufficient grounds to make either policy or operational decisions that may compromise the effective management of health and safety at work.

LIST OF APPENDICES

Appendix 1 – Health, Safety & Welfare Policy.

LIST OF BACKGROUND PAPERS

None.

PRE SCREENING EQUALITY IMPACT ASSESSMENT



For equalities profile information please visit [Norfolk Insight - Demographics and Statistics - Data Observatory](#)

Name of policy/service/function	Health, Safety & Welfare Policy			
Is this a new or existing policy/service/function? (<i>tick as appropriate</i>)	New		Existing	X
Brief summary/description of the main aims of the policy/service/function being screened.	The policy sets out the arrangements the council has in place to ensure it meets its legal obligations in managing Health & Safety within the organisation.			
Please state if this policy/service is rigidly constrained by statutory obligations, and identify relevant legislation.	The council is required to have a written policy under the Health & Safety at Work etc. Act 1974.			
Who has been consulted as part of the development of the policy/service/function? – new only (<i>identify stakeholders consulted with</i>)	Health & Safety Board Executive Leadership Team			


Question	Answer
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<p>1. Is there any reason to believe that the policy/service/function could have a specific impact on people from one or more of the following groups, for example, because they have particular needs, experiences, issues or priorities or in terms of ability to access the service?</p> <p>Please tick the relevant box for each group. NB. Equality neutral means no negative impact on any group.</p> <p><i>If potential adverse impacts are identified, then a full Equality Impact Assessment (Stage 2) will be required.</i></p> <p><i>*For more information on health inequalities please visit The King's Fund</i></p>		Positive	Negative	Neutral	Unsure
	Age	x			
	Disability	x			
	Sex			x	
	Gender Re-assignment			x	
	Marriage/civil partnership			x	
	Pregnancy & maternity	x			
	Race			x	
	Religion or belief			x	
	Sexual orientation			x	
	Armed forces community			x	
	Care leavers			x	
	Health inequalities*			x	
Other (eg low income, caring responsibilities)			x		

Please provide a brief explanation of the answers above:



The Health and Safety at Work etc Act 1974 and the regulations made under it apply to all employees of the council equally. There are however certain groups who are subject to additional consideration to ensure they are not placed subject to risks, these include anyone under the age of 18, pregnant or new mothers and anyone with a specific disability.

Question	Answer	Comments		
2. Is the proposed policy/service likely to affect relations between certain equality communities or to damage relations between the equality communities and the Council, for example because it is seen as favouring a particular community or denying opportunities to another?	No			
3. Could this policy/service be perceived as impacting on communities differently?	No			
<p>If 'yes' to questions 2 - 3 a full impact assessment will be required unless comments are provided to explain why this is not felt necessary:</p>				
<p>Decision agreed by EWG member:</p>				
<p>4. Are any impacts identified above minor and if so, can these be eliminated or reduced by minor actions? If yes, please agree actions with a member of the Corporate Equalities Working Group and list agreed actions in the comments section</p>	Yes / No	Actions:		
		Actions agreed by EWG member:		
5. Is the policy/service specifically designed to tackle evidence of disadvantage or potential discrimination?	Yes / No	Please provide brief summary:		
Assessment completed by: Name				
Job title				
Date completed				
Reviewed by EWG member	 A Demonty	Date	07.05.26	
<p><input type="checkbox"/> Please tick to confirm completed EIA Pre-screening Form has been shared with Corporate Policy (corporate.policy@west-norfolk.gov.uk)</p>				



Borough Council of
**King's Lynn &
West Norfolk**



Health, Safety & Welfare Policy

PART ONE- General Statement of Intent

The Borough Council of King's Lynn and West Norfolk recognise that health and safety and welfare of our employees and others affected by our activities is fundamental to the effective delivery of its operations and its strategic aims of:

- Promoting growth and prosperity for the benefit of West Norfolk
- Protecting and enhancing our environment
- Delivering services that are efficient, effective and responsive
- Supporting and strengthening our communities

Our commitment to Health, Safety and Welfare is underpinned by the Principles of Prevention, together with the Council's values and behaviours. These guide the way we protect our workforce and all those who may be affected by our activities.

The Council will ensure the health, safety and welfare of employees and others who may be affected by its activities, in accordance with the Health and Safety at Work etc. Act 1974 and all subsequent regulations. We are committed to meeting our statutory duties and maintaining full compliance with all applicable legislative requirements.

The council will provide, so far as is reasonably practicable:

- A safe working environment for all employees and contractors
- A safe environment for visitors and members of the public visiting council owned or managed premises or activities
- Safe systems of work
- Safe handling, storage and use of substances
- Information, instruction, training and supervision as is necessary to ensure employees are competent in their jobs
- Safe access and egress
- Control and maintenance of workplace and welfare at work

The council:

- Recognises that health, safety and welfare are of paramount importance and an integral part of all its activities
- Is committed to the systematic identification of hazards, control of risk and compliance with applicable legal requirements and other requirements to which it subscribes.
- Will communicate and consult with employees on matters relating to the health, safety and welfare, policies, procedures guidance and performance monitoring.
- Establishes and maintains an effective health, safety and welfare management structure with individual posts having clearly defined responsibilities and competencies.
- Will ensure it provides adequate financial, human and physical resources to provide a working environment that protects the health, safety and welfare of

our employees and the health and safety of those using our facilities or otherwise affected by our working activities.

Successful implementation is dependent on the co-operation of those who carry out the work, and take the risks, to act responsibly and do everything they can to prevent personal injury to themselves or others.

The Chief Executive, Executive Leadership Team, Corporate Leadership Team, Service Managers, Line Managers and Employees, have defined responsibilities which are detailed in Part Two - Organisation.

The overall responsibility for this Policy rests with the Chief Executive and the Leader of the Council. They will be supported by the Executive and Corporate Leadership Teams and the Corporate Health & Safety team in ensuring that this Policy is developed, implemented, maintained, monitored, and reviewed.

Signed: (Chief Executive) Dated:

Signed: (Leader of the Council) Dated:

PART TWO- Organisation

Governance

The Council's organisational responsibilities as they relate to developing a health, safety and welfare policy are defined in the table below. These roles are defined as:

Assigned for developing the Policy and procedure	Environmental Health Manager (Commercial)
Accountable for the policy and implementation	Chief Executive
Consulted prior to final policy implementation or amendment.	Health & Safety Board, Executive Leadership Team, Corporate Leadership Team
Informed of policy implementation or amendment.	All employees of the council

Roles & Responsibility

The Council, as the employer, holds the overall responsibility for ensuring the health, safety, and welfare of all its employees, as well as protecting others who may be affected by its activities. However, health, safety and welfare are not solely the responsibility of the employer. Every employee has a duty to contribute to maintaining a safe working environment, and as an individual's role within the organisation becomes more senior or specialised, their level of responsibility increases accordingly.

The following outlines these delegations;

All Employees

Employees include temporary and agency workers and they must;

- Familiarise with, and conform to, the Health, Safety & Welfare Policy, procedures, and/or guidance.
- Work with due regard to the health, safety and welfare of themselves and that of others who may be affected by their work/activities.
- Co-operate with the council, including complying with all safety instructions given by their line management, to ensure that its obligations with regards to health, safety and welfare are complied with.
- Notify their Line Manager immediately of any health, safety and welfare issues or concerns that they have, that they are not able to put right or are outside their control.
- Report all accidents, incidents and near misses and unacceptable customer behaviour to their line manager.

- Not interfere with, or misuse, anything provided by the council in the interest of health, safety or welfare.
- Ensure that all tools and equipment provided by the council are properly used in accordance with the manufacturer's, supplier's and/or installer's instructions and report any defects to their Line Manager immediately.
- Complete any relevant training assigned to them by the council in the designated timescale.
- Suitable and appropriate protective equipment and clothing will be provided where necessary, and all employees are required to use the equipment provided correctly and consistently whenever it is needed or required for their work.
- Cooperate with any requirement for statutory health surveillance as required due to their duties.

Line Managers

In addition to the responsibilities outlined for employees above, Line Managers are also accountable for the effective implementation of the Health, Safety and Welfare Policy and procedures within their area of control. Whilst some duties may be specifically designated, Line Managers will be responsible for:

- Ensuring they are familiar with the Health, Safety and Welfare Policy and procedures and any relevant risk assessments and safe systems of work.
- Ensuring they are aware of health and safety requirements and provide information, instruction, training and supervision to new and existing employees under their control to ensure, as far as reasonably practicable, their health and safety and that of others affected by their activity.
- Ensure that employees have a suitable level of health, safety and welfare knowledge to keep them and others safe during their first days of work.
- Ensuring that employees under their control are adequately trained and fully aware of the hazards involved in the work undertaken and that all training is completed in a timely manner to ensure compliance.
- Communicating the key findings of risk assessments related to the work undertaken by employees under their control.
- Developing safe systems of work to ensure safety for all, by information, instruction, training, supervision, particularly in the case of young, inexperienced or vulnerable workers, pregnant workers, new mothers and volunteers.
- Ensuring that any information, instruction and training is understood and recorded.

- Reporting and investigating all accidents, incidents, near misses and Unacceptable Customer Behaviour (UCB) with a view to taking such measures to prevent recurrence.
- Undertaking inspections and monitoring to ensure that control measures are being maintained and that all employees are following safety instructions and safe practices.
- Ensuring that Team Meetings regularly occur and always include health, safety and welfare as a standard item, providing opportunities for employees to be consulted on matters which affect their health, safety and welfare.
- Co-operating with trade union health and safety representatives in accordance with agreed processes.
- Arrange for the provision of suitable and appropriate protective equipment and clothing where necessary, ensuring that all staff have access to it, maintain and use it whenever required.
- Raise with Service Managers, Corporate Health and Safety and/or Employees where new guidance or legislation impacts or could affect their work areas.
- Identify all employees whose roles expose them to hazards requiring statutory health surveillance ensuring they are enrolled in the appropriate surveillance programme, which will include access to assessments, maintaining records, and ensuring follow-up actions are completed.

Service Managers

In addition to the responsibilities outlined for Line Managers above, Service Managers are accountable to Assistant Directors for ensuring that the Health, Safety and Welfare Policy and procedures are complied with within their Service Areas. Duties may be delegated (but not responsibility) to Line Managers and other employees as necessary, but they remain responsible for:

- Providing leadership on health and safety.
- Ensuring the availability of resources essential to establish, implement, maintain and improve the health and safety system. Ensuring that Line Managers, are made aware of the areas and extent to their specific health, safety and welfare responsibilities.
- Ensuring adequate inspections, monitoring and review of health, safety and welfare procedures are undertaken.
- Ensuring the systematic assessment of hazards and the effective implementation of risk management systems.
- Ensuring statutory testing and examination of equipment and the keeping of registers and records where necessary is undertaken.
- Ensuring systems are in place for the inspection and maintenance of equipment.
- Ensuring the necessary information, instruction, training and supervision is provided to their employees.

- Ensuring that the necessary resources are available to employees to fulfil their health and safety obligations.
- Keeping themselves informed of incidents, accidents, near misses or Unacceptable Customer Behaviour, within their area of control and ensure that action is taken to prevent recurrence.
- Ensuring the effective safety management systems of contractors carrying out works within their area of responsibility.
- Providing adequate time and facilities for safety representatives.
- Ensuring where activities under their control are subject to statutory health surveillance, both the work and the employees are appropriately monitored.

Assistant Directors

In addition to the responsibilities outlined for Service Managers above, Assistant Directors are also responsible for the successful implementation of the policy within their service areas, they will:

- Define roles, allocate responsibilities and accountabilities, delegate authorities to facilitate effective health and safety management.
- Ensure all employees with the responsibilities above are adequately trained and resourced to fulfil their health, safety and welfare duties.

Executive Leadership Team & Corporate Leadership Team

In addition to the responsibilities outlined for Assistant Directors, the Executive Leadership Team and Corporate Leadership Team, comprising the Chief Executive, Deputy Chief Executive, Chief Operating Officer, Chief of Staff, and all Assistant Directors, are also responsible for:

- Supporting the Chief Executive in meeting their Health & Safety responsibilities for the council.
- Ensuring that robust health, safety and welfare management systems exist within the council and all service areas demonstrate compliance.
- Ensuring the council has a suitably trained, qualified and resourced Corporate Health Safety Team to carry out specified duties across the authority.

The Chief Executive

In addition to the responsibilities outlined above the Chief Executive holds the overall accountability for health, safety and welfare across the council.

Elected Members

Whilst not employees, elected members must have regard to health, safety and welfare in their council decisions and actions.

- Members will be provided with the opportunity to attend relevant training to enable them to appreciate and understand the obligations placed on the Chief Executive, the Executive and Corporate Leadership Teams.
- Elected members have access to the health and safety information booklet from the LGA Health and Safety in the council- Councillor workbook.

Specific Roles

Alongside the general levels of responsibility within the organisation, several specialised roles provide targeted support to ensure the council can effectively fulfil its health, safety and welfare functions.

Assistant Director Health Wellbeing & Public Protection will act as the Corporate Leadership Team (CLT) team representative for health and safety. As such they will actively promote and progress corporate health and safety issues and actions at Corporate Leadership Team.

Assistant Director Corporate Services will act as the Corporate Leadership Team (CLT) team representative for staff welfare. As such they will actively promote and progress corporate welfare issues and actions at Corporate Leadership Team.

Corporate Health & Safety Team provide competent Person advise as defined by Regulation 7(1) of the Management of Health and Safety at Work Regulations 1999, to oversee the implementation of the Health, Safety and Welfare Policy and procedures on behalf of the council, ensuring it complies with current legislation.

The team will provide advice, guidance and support to the council on all health, safety and welfare, including on:

- Provide an analysis of the potential implications of new health, safety and welfare legislation on council services, along with an assessment of how additional legislation highlighted by employees or subject experts may influence the council's operations of new legislation and its impact on the council
- Review and assess risk assessments, where appropriate.
- Safe systems of work for operations undertaken by the council and review and report on safety recommendations issued.
- Maintain an overview of the systems in place for the management of contractors' health and safety.

- Develop and review the corporate Health, Safety and Welfare Policy, procedures and guidance which provide detail on specific health, safety and welfare requirements.
- Manage and maintain the council's health and safety system.
- Audit and inspect as necessary the council's operations and advise appropriate officers of any actions necessary to ensure compliance with the health and safety systems.
- Maintain an overview of fire safety within the council, including within premises occupied by the Council.
- Provide health and safety performance reports to the Health & Safety Board and an annual health and safety performance report to the Chief Executive and Corporate Leadership Team.
- Advise on and, as necessary, facilitate the provision of training courses in accordance with the corporate training programme, including induction training and e-learning.
- Support the investigation, as necessary, of accidents, incidents and near misses and unacceptable customer behaviour and recommend corrective action.
- Take immediate direct action in cases of imminent danger, where that action cannot be taken by Line Managers.
- Record and review details of accidents, incidents or near misses at work, unacceptable customer behaviour and provide advice on ways in which recurrence could be minimised or eliminated.
- Liaise, where required, with the Health & Safety Executive (HSE) and other enforcement authorities and external bodies on health and safety issues.

Human Resources duties are to:

- Advise as required on all matters relating to sickness absence and employee welfare issues, including compliance with relevant legislation and good practice.
- Will signpost employees to the welfare, wellbeing and mental health provision that the council offers including Employee Assistance programme (EAP) and Occupational Health
- Retain the services of Occupational Health Services that provide advice on matters relating to occupational health.

Corporate Health and Safety Board responsibilities are defined within the terms of reference. The boards overriding objectives are to:

- Ensure a positive culture of health, safety and welfare across the Council by promoting cooperation between the Council, as an employer, and its employees and contractors in instigating, developing and carrying out

measures to ensure the health & safety, of our employees and others affected by our work and also the welfare and wellbeing of our employees at work.

- Serve as a channel for encouraging employee involvement and consultation in promoting and improving health, safety and welfare, through activities approved by the board.
- Provide a strategic overview of health, safety and welfare in the organisation and be committed to driving continuous improvement regarding health, safety and welfare at the Council.
- Ensure the Council complies with all legal requirements and the requirements set out in the Health, Safety and Welfare Policy.
- Keep an approved Terms of Reference (ToR) under regular review.

Safety Representatives recognised Trade Union and non-trade union safety representatives can exercise their rights to:

- Get involved in investigations for reportable accidents/incidents.
- Represent the views of the employees.
- Undertake inspections of the workplace and formally report back to Health and Safety Board and the Corporate Health & Safety Team.
- Be consulted on any changes to corporate documentation and procedures.

Volunteers

Some aspects of engaging and working with volunteers are covered by health and safety legislation. Any service utilising volunteers will be required to take account of their role in risk assessments and follow HSE guidance ([Volunteering: Guidance for employers](#))

Wholly owned companies

This Health, Safety and Welfare Policy applies solely to the activities of the Borough Council. It does not extend to any wholly owned companies, which are responsible for maintaining their own Health & Safety policies.

PART THREE - Arrangements

Policies, Procedures & Guidance

The Health, Safety and Welfare Policy is supported by a range of additional procedures and guidance designed to control specific hazards encountered within the Council. All related documents are available in the Health & Safety section of the Councils Intranet.

Health & Safety Training/Competence

The health and safety training requirements for all employees will be identified on induction on a regular ongoing basis and at the individual's annual appraisal. Key health and safety training for all employees is documented in the Council's Learning Management System.

Monitoring

The monitoring of this Policy will be carried out by the Corporate Health & Safety Team, actively through health and safety auditing and inspections and reactively by supporting the investigation of accident, incidents, near miss, unacceptable customer behaviour and ill health statistics.

All monitoring activity will be reported to the Corporate Health & Safety Board.

An annual Health & Safety Performance Report will be provided to the Health & Safety Board by the Corporate Health & Safety Team. Quarterly assurance reports will also be provided to the Board.

Review

Corporate Health & Safety team will review the policy annually, or earlier if changes in health and safety legislation, guidance, or other relevant circumstances require it. In addition, every three years the policy will be reviewed by Council.

Details of the review and any recommendation will be provided to the Health & Safety Board and Corporate Leadership Team.

Version Control

Version number	Summary of Changes	Responsible Officer	Date Approved
0.1	New format and content to replace previous General Health, Safety and Welfare Policy V.5 Jan 2025	Philippa Smith	

DRAFT - CORPORATE PERFORMANCE PANEL WORK PROGRAMME 2026/2027

DATE OF MEETING	TITLE	TYPE OF REPORT	LEAD OFFICER	OBJECTIVES AND DESIRED OUTCOMES
3rd June 2026 at 4.30pm	Call-ins (if any)	Standing Item		
	Chairs Signing of the Scrutiny and Executive Protocol	Operational		To promote the relationship between the Panel and the Executive.
	Any Cabinet Reports which fall within the remit of the Panel – to be confirmed.	Standing Item		
	Cabinet Forward Decisions List, Shareholder Committee Forward Plan and Work Programme.	Standing Item		
	Membership and status of Task Groups and Informal Working Groups	Operational	Democratic Services	
	Nominations to any Appointments to Outside Bodies	Operational	Democratic Services	
	Annual Complaints Report	Annual Report	Charrlotte Marriott	To consider the annual complaints report.
	Data Protection Monitoring Report	Update	Charlotte Marriott	To receive the data protection monitoring report.
	Cabinet Report – Health and Safety Policy and Statement of Intent	Cabinet Report	Mark Whitmore	To consider the report and make any appropriate recommendations to Cabinet.
8th July 2026 at 4.30pm	Call-ins (if any)	Standing Item		
	Report from the Constitution Informal Working Group	Informal Working Group Report		To receive a report from the Informal Working Group and comment on the report.

92

Agenda Item 14

	Chairs Signing of the Scrutiny and Audit Relationship Protocol	Operational		To establish the relationship between the Panel and the Audit Committee.
	Full Year Performance Management Report	Cabinet Report	Debbie Ess	To consider the report and make any appropriate recommendations to Cabinet.
	Corporate Performance Monitoring 2026/2027 Target Setting		Debbie Ess	
	Revenue Outturn 2025/2026	Cabinet Report	Carl Holland	To consider and approve the draft revenue outturn position for 2024/2025 for the Council.
	Capital Outturn 2025/2026	Cabinet Report	Carl Holland	Part Exempt - To report the outturn 2024/2025 for the Capital Programme and receive an update to the Capital Programme 2024/2029.
	Any Cabinet Reports which fall within the remit of the Panel – to be confirmed.	Standing Item		
	CNC Building Control	Update	Stuart Ashworth	In response to Councillor de Winton request. To inform the Panel
	Cabinet Forward Decisions List, Shareholder Committee Forward Plan and Work Programme.	Standing Item		
2nd September 2026 at 4.30pm	Call-ins (if any)	Standing Item		
	Any Cabinet Reports which fall within the remit of the Panel – to be confirmed.	Standing Item		
	Cabinet Forward Decisions List, Shareholder Committee	Standing Item		

	Forward Plan and Work Programme.			
6th October 2026 at 4.30pm	Call-ins (if any)	Standing Item		
	Council Tax Support 2026/2027	Cabinet Report	Jo Stanton	
	Budget Monitoring Quarter 2	Cabinet Report	Carl Holland	To report on performance against budget for Capital and Revenue 2025/2026.
	Any Cabinet Reports which fall within the remit of the Panel – to be confirmed.	Standing Item		
	Cabinet Forward Decisions List, Shareholder Committee Forward Plan and Work Programme.	Standing Item		
12th January 2027 at 4.30pm	Call-ins (if any)	Standing Item		
	Any Cabinet Reports which fall within the remit of the Panel – to be confirmed.	Standing Item		
	Cabinet Forward Decisions List, Shareholder Committee Forward Plan and Work Programme.	Standing Item		
	Budget Monitoring Quarter 3	Cabinet Report	Carl Holland	To report on performance against budget for Capital and Revenue 2025/2026.
10th March 2027 at 4.30pm	Call-ins (if any)	Standing Item		

	Any Cabinet Reports which fall within the remit of the Panel – to be confirmed.	Standing Item		
	Cabinet Forward Decisions List, Shareholder Committee Forward Plan and Work Programme.	Standing Item		

Forthcoming Items to be scheduled

Report of the Informal Working Group – Constitution – Ongoing

Notice of Motion (2/26) Submitted by Councillor Moore (considered at Full Council on 29th January 2026) – Review of Consultant Expenditure Relating to the Lynnsport Proposal – to be scheduled

Assurance and Update Report on Unregistered Titles – September/October 2026



Forward Decisions List

The Forward Decision List outlines the Cabinet's upcoming decisions over the next few months. It specifies which decisions are considered significant and indicates those that may lead to portions of the meeting being conducted in private. In addition, the list highlights the responsible Lead Officer and Portfolio Holder.

This document will be updated and republished on the Council's website each month. Any queries relating to the Forward Decision List should be forwarded to Democratic Services: Democratic.Services@West-Norfolk.gov.uk

What is a Key Decision?

Key decisions are defined as an executive decision which is likely:

- ⌘ (a) *To result in the local authority incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates, or (significant relates to £500,000 or more)*
- (b) *To be significant in terms of its effect on communities living or working in the area comprising two or more wards and electoral divisions in the Council's areas. (significant relates to one third of the population in a ward).*

The key decision and non-key decision process is only for decisions made by the Executive, i.e. not those made at Planning, Council, Licensing etc. When assessing whether or not a decision is a key decision the decision maker must consider all the circumstances of the case. However, a decision which results in a significant amount spent or saved will generally be considered to be a key decision.

Why might a decision be made in private?

Members of the public may be excluded from a meeting or information if the nature of the business to be discussed is likely to involve the disclosure of exempt information such as details that could identify an individual or pertain to the financial or commercial interests of a person or organisation. Such information should only be made exempt, if it is in the public interest to do so under Schedule 12A of the Local Government Act 1972.



Cabinet Members:

Councillor Alistair Beales: Leader
Councillor Simon Ring: Deputy Leader and Portfolio Holder for Business
Councillor Jim Moriarty: Portfolio Holder for Planning and Licensing
Councillor Sandra Squire: Portfolio Holder for Environmental and Coastal
Councillor Michale de Whalley: Portfolio Holder for Climate Change and Biodiversity
Councillor Chris Morely: Portfolio Holder for Finance
Councillor Jo Rust: Portfolio Holder for People and Communities
Councillor Sue Lintern: Portfolio Holder for Culture and Events

Cabinet Members can be contacted directly and their contact details can be found via our website: [Committee details - Cabinet](#)

97

Senior Management

Kate Blakemore: Chief Executive
Michelle Drewery: Deputy Chief Executive and Section 151 Officer
Emma Kavanagh: Chief Operating Officer
Emma Hodds: Chief of Staff and Monitoring Officer
Siobhan Cleeve: Interim Assistant Director Leisure and Culture
Stuart Ashworth: Assistant Director Environment and Planning
Liz MacDonald: Assistant Director Property & Projects
Martin Chisholm: Assistant Director Operations & Commercial
Duncan Hall: Assistant Director Regeneration, Housing & Place
Carl Holland: Assistant Director for Finance and Deputy Section 151 Officer
Honor Howell: Strategic Lead to the Chief Executive and Leader
Paul Lowes: Assistant Director Corporate Services
Mark Whitmore: Assistant Director, Health, Wellbeing and Public Protection

Members of the Senior Management team can be contacted directly via esteam@west-norfolk.gov.uk



JUNE 2026						
Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
09 June 2026	King's Lynn and West Norfolk new Local Plan - Governance arrangements for the plan-making process	Key	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and Planning (Stuart Ashworth)	Open
09 June 2026	Appointment to Cabinet Sub Committees and Task Groups for 2026 - 2027	Non	Cabinet	Leader of the Council	Chief of Staff and Monitoring Officer (Emma Hodds)	Open
09 June 2026	West Norfolk Economic Strategy and Action Plan	Non	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Regeneration, Housing & Place (Duncan Hall)	Open
09 June 2026	EXEMPT - Disposal of Land at Hunstanton	Key	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Property (Liz MacDonald)	Fully exempt 3 Information relating to the financial or business affairs of any particular person (including

86



						the authority holding that information)
09 June 2026	Data Protection Policy	Non	Cabinet	Leader of the Council	Chief of Staff and Monitoring Officer (Emma Hodds)	Open
09 June 2026 25 June 2026	Health and Safety Policy and Statement of Intent	Non	Cabinet Council	Cabinet Member for People and Communities	Assistant Director, Health, Wellbeing and Public Protection (Mark Whitmore)	Open

JULY 2026

Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
14 July 2026	Local Plan Scoping (Regulations 29) - Consultation Materials	Key	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and Planning (Stuart Ashworth)	Open
14 July 2026	Full Year Performance Management Report 2025 - 2026	Non	Cabinet	Leader of the Council	Chief of Staff and Monitoring Officer (Emma Hodds)	Open
14 July 2026	Building Safety Levy - Proposed	Non	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and	Open



	administration by CNC Building Control				Planning (Stuart Ashworth)	
14 July 2026	CIL Strategic Project Funding	Key	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and Planning (Stuart Ashworth)	Open
14 July 2026	Revenue Outturn 2025 -2026	Non	Cabinet	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
14 July 2026	Capital Outturn 2025 - 2026	Non	Cabinet	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
SEPTEMBER 2026						
Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
08 September 2026	Business Improvement District - Business Plan	Key	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Regeneration, Housing & Place (Duncan Hall)	Open
08 September 2026	Lynnsport Proposals	Key	Cabinet	Deputy Leader and Cabinet Member for Business	Strategic Advisor to the CEO and Leader (Honor Howell)	Open



24 September 2026			Council			
08 September 2026	National Planning Scheme of Delegation	Non	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and Planning (Stuart Ashworth)	Open
24 September 2026			Council			
08 September 2026	King's Lynn Conservation Area Appraisal and Management Plan	Non	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and Planning (Stuart Ashworth)	Open
24 September 2026			Council			
08 September 2026	Introduction of a surcharge for invalid planning applications	Non	Cabinet	Cabinet Member for Planning and Licensing	Assistant Director, Environment and Planning (Stuart Ashworth)	Open
24 September 2026			Council			

OCTOBER 2026

Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
13 October 2026	King's Lynn Masterplan and Parking Strategy	Key	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Regeneration, Housing & Place (Duncan Hall)	Open
29 October 2026			Council			
13 October 2026	Hunstanton Masterplan and	Key	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Regeneration, Housing	Open



29 October 2026	Parking Strategy		Council		& Place (Duncan Hall)	
13 October 2026	Council Tax Support Scheme	Key	Cabinet	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
29 October 2026			Council			
NOVEMBER 2026						
Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
17 November 2026	Budget Monitoring Quarter 2	Non	Cabinet	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
JANUARY 2027						
Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
FEBRUARY 2027						



Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
03 February 2027	Budget Monitoring Quarter 3	Non	Cabinet	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
03 February 2027 25 February 2027	Medium Term Financial Strategy 2026-2031	Key	Cabinet Council	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	
03 February 2027 25 February 2027	Capital Programme 2026-2030	Key	Cabinet Council	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
03 February 2027 25 February 2027	Treasury Management Strategy	Key	Cabinet Council	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	
03 February 2027 25 February 2027	Capital Strategy	Key	Cabinet Council	Cabinet Member for Finance	Assistant Director, Finance and Deputy Section 151 Officer (Carl Holland)	Open
TO BE SCHEDULED						



Date of meeting	Report title	Key or Non-Key Decision	Decision Maker	Cabinet Member/Portfolio	Lead Officer	Open or Exempt
	Overnight Campervan Parking in Hunstanton	Non	Cabinet	Leader of the Council	Assistant Director, Operations & Commercial (Martin Chisholm)	Open
	Empty Homes Strategy Review	Key	Council	Cabinet Member for People and Communities	Assistant Director, Health, Wellbeing and Public Protection (Mark Whitmore)	Open
	King's Lynn Town Football Club	Non	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Property (Liz MacDonald)	Fully exempt 3 Information relating to the financial or business affairs of any particular person (including the authority holding that information)
	Housing Assurance Strategy	Non	Council	Cabinet Member for People and Communities	Assistant Director, Health, Wellbeing and Public Protection (Mark Whitmore)	Open
	Domestic Abuse Tenants/Residents Policy and Domestic Abuse Intersectionality	Non	Council	Cabinet Member for People and Communities	Assistant Director, Regeneration, Housing & Place (Duncan Hall)	Open



	Policy					
	IT Hardware Refresh	Key	Cabinet	Cabinet Member for Finance	Assistant Director, Corporate Services (Paul Lowes)	Fully exempt
	Local Government Reorganisation Consultation Response	Key	Council	Leader of the Council	Chief Executive (Kate Blakemore)	Open
	Heacham Beach Huts	Key	Cabinet	Deputy Leader and Cabinet Member for Business	Assistant Director, Property (Liz MacDonald)	Part exempt 3 Information relating to the financial or business affairs of any particular person (including the authority holding that information)

SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

WeDate of Meeting	Title	Leader Officer	Decision Maker	Public or Private
March 2026	Reserved Matter: Loan Facility WNHC	Carl Holland – Assistant Director for Finance Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Exempt Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	Mid-year update from WNHC on performance against current Business Plan WNHC 6 monthly governance assurance Report (incl financial, risk, internal audit, etc)	Karl Patterson - Housing Development Manager Other invitees: Directors of Boards incl Duncan Hall/ Company Secretary provision	Shareholder Committee	Open
	Mid-year update from WNPL on performance against current Business Plan WNPL 6 monthly governance assurance Report (incl financial, risk, audit, policy)	Karl Patterson - Housing Development Manager Other invitees: Directors of Boards incl Duncan Hall/ Company Secretary provision	Shareholder Committee	Open
	WNHC Board Membership	Carl Holland – Assistant Director for Finance		Open

SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

	AWN Board Membership	Carl Holland – Assistant Director for Finance		Open
	Standing item for any Reserved Matters		Shareholder Committee	
June 2026	WNPL Accounts	Karl Patterson		Public
	Annual Review of Governance Documents for WNHC and WNPL	Charlotte Marriott – Corporate Governance Manager	Shareholder Committee	Private – Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	Annual Review of Shareholder Committee Terms of Reference	Charlotte Marriott – Corporate Governance Manager	Shareholder Committee	Public
	Status of Alive West Norfolk	Carl Holland – Assistant Director for Finance and Deputy Section 151 Officer	Shareholder Committee	Public
	Reserved Matter: Loan Facility WNPL	Carl Holland – Assistant Director for Finance	Shareholder Committee	Partially Exempt Contains exempt information under para 3 – information

SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

				relating to the business affairs of any person (including the authority)
	WNHC Draft Business Plan for 2026/2027	Charlotte Marriott – Corporate Governance Manager	Shareholder Committee	Private – Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	WNPL Draft Business Plan for 2026/2027	Charlotte Marriott – Corporate Governance Manager	Shareholder Committee	Private – Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	Report on WNPL Financial Performance during 2024/2025	Carl Holland – Assistant Director for Finance	Shareholder Committee	Public
	Standing item for any Reserved Matters			

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SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

September 2026	WNHC Report on Performance against Business Plan during 2025/2026	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Partially Exempt Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	WNHC Final Business Plan for 2026/2027	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Private – Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	WNPL Report on Performance against Business Plan during 2025/2026	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl	Shareholder Committee	Partially Exempt Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)

SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

		Patterson/Company Secretary provision		
	WNPL Final Business Plan for 2026/2027	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Private – Contains exempt information under para 3 – information relating to the business affairs of any person (including the authority)
	WNHC 6 monthly governance assurance Report (incl financial, risk, internal audit, etc)	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Public
	WNPL 6 monthly governance assurance Report (incl financial, risk, audit, policy)	Charlotte Marriott – Corporate Governance Manager Other invitees:	Shareholder Committee	Public

SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

		Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision		
	WNHC 6 monthly governance assurance Report (incl financial, risk, internal audit, etc)	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Public
	WNPL 6 monthly governance assurance Report (incl financial, risk, audit, policy)	Charlotte Marriott – Corporate Governance Manager Other invitees: Directors of Boards incl Duncan Hall/Karl Patterson/Company Secretary provision	Shareholder Committee	Public
December 2026				

SHAREHOLDER COMMITTEE FORWARD WORK PROGRAMME

March 2027				

To be scheduled :

Annual Report to Audit Committee on Wholly Owned Companies