

Public Document Pack

Peak District National Park Authority

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Aldern House, Baslow Road, Bakewell, Derbyshire. DE45 1AE



Our Values: Care – Enjoy – Pioneer

Our Ref: A.1142/4995

Date: 3 July 2025



NOTICE OF MEETING

Meeting: **National Park Authority**

Date: **Friday 11 July 2025**

Time: **10.00 am**

Venue: **Aldern House, Baslow Road, Bakewell**

PHILIP MULLIGAN
CHIEF EXECUTIVE

AGENDA

1. **Apologies for Absence**
2. **Election of Chair of the Authority** 5 mins
3. **Election of Deputy Chair of the Authority** 5 mins
4. **Minutes of previous meetings held on 9 May 2025 and 20 June 2025** 5 mins
(Pages 7 - 22)
5. **Urgent Business**
6. **Public Participation**
To note any questions or to receive any statements, representations, deputations and petitions which relate to the published reports on Part A of the Agenda.
7. **Members Declarations of Interest**
Members are asked to declare any disclosable pecuniary or prejudicial interests they may have in relation to items on the agenda for this meeting.
8. **Report of the Member Appointment Process Panel** (Pages 23 - 36) 40 mins
Appendix 1
9. **Member Annual Attendance Report 2024/2025** (Pages 37 - 42) 10 mins
Appendix 1
10. **Annual Calendar of Meetings 2025/2026** (Pages 43 - 46) 5 mins
Appendix 1
11. **Services Showcase Presentation** 30 mins
12. **Chief Executive Report** (Pages 47 - 50) 5 mins
13. **Peak District National Park Foundation Report** (Pages 51 - 56) 10 mins
14. **Targets and Outcome Framework** (Pages 57 - 60) 20 mins
Appendix 1

Background Papers
15. **Financial Outturn** (Pages 61 - 78) 10 mins
Appendix A

Appendix B

Appendix C

Appendix D

- 16. Internal Audit Report Block 2 2024/25** *(Pages 79 - 104)* 10 mins
Appendix 1
Appendix 2
Appendix 3
- 17. Internal Audit 2024/25 Annual Report** *(Pages 105 - 142)* 10 mins
Appendix 1
Appendix 2
Appendix 3
- 18. Report from Chair of Planning Committee - verbal update** 5 mins
- 19. Report from the Chair of P&R Committee - verbal update** 5 mins
- 20. Reports from Outside Bodies**
20.1 - Local Access Forum
20.2 - Derbyshire Archaeological Advisory Committee
- 21. Exempt Information S100(A) Local Government Act 1972**
The Committee is asked to consider, in respect of the exempt items whether the public should be excluded from the meeting to avoid the disclosure of Exempt Information.

Draft motion:
That the public be excluded from the meeting during consideration of agenda item XX to avoid the disclosure of Exempt Information under S100 (A) (4) Local Government Act 1972, Schedule 12A, paragraph - INSERT PARAGRAPH No HERE FOLLOWED BY DESCRIPTION OF EXEMPTION

PART B

The following items are exempt, confidential items.

Please go to the Part B agenda items.

Duration of Meeting

In the event of not completing its business within 3 hours of the start of the meeting, in accordance with the Authority's Standing Orders, the Authority will decide whether or not to continue the meeting. If the Authority decides not to continue the meeting it will be adjourned and the remaining business considered at the next scheduled meeting.

If the Authority has not completed its business by 1.00pm and decides to continue the meeting the Chair will exercise discretion to adjourn the meeting at a suitable point for a 30 minute lunch break after which the committee will re-convene.

ACCESS TO INFORMATION - LOCAL GOVERNMENT ACT 1972 (as amended)

Agendas and reports

Copies of the Agenda and Part A reports are available for members of the public before and during the meeting. These are also available on the website <http://democracy.peakdistrict.gov.uk>

Background Papers

The Local Government Act 1972 requires that the Authority shall list any unpublished Background Papers necessarily used in the preparation of the Reports. The Background Papers referred to in each report, PART A, excluding those papers that contain Exempt or Confidential Information, PART B, can be inspected on the Authority's website.

Public Participation and Other Representations from third parties

Please note that meetings of the Authority and its Committees may take place at venues other than its offices at Aldern House, Bakewell when necessary. Public participation is still available and anyone wishing to participate at the meeting under the Authority's Public Participation Scheme is required to give notice to the Customer and Democratic Support Team to be received not later than 12.00 noon on the Wednesday preceding the Friday meeting. The Scheme is available on the website <http://www.peakdistrict.gov.uk/looking-after/about-us/have-your-say> or on request from the Customer and Democratic Support Team 01629 816362, email address: democraticandlegalsupport@peakdistrict.gov.uk.

Written Representations

Other written representations on items on the agenda, except those from formal consultees, will not be reported to the meeting if received after 12noon on the Wednesday preceding the Friday meeting.

Recording of Meetings

In accordance with the Local Audit and Accountability Act 2014 members of the public may record and report on our open meetings using sound, video, film, photograph or any other means this includes blogging or tweeting, posts on social media sites or publishing on video sharing sites. If you intend to record or report on one of our meetings you are asked to contact the Customer and Democratic Support Team in advance of the meeting so we can make sure it will not disrupt the meeting and is carried out in accordance with any published protocols and guidance.

The Authority uses an audio sound system to make it easier to hear public speakers and discussions during the meeting and makes an audio visual broadcast and recording available after the meeting. These recordings will be retained for three years after the date of the meeting.

General Information for Members of the Public Attending Meetings

Please note meetings of the Authority and its Committees may take place at venues other than its offices at Aldern House, Bakewell when necessary, the venue for a meeting will be specified on the agenda. There may be limited spaces available for the public at meetings and priority will be given to those who are participating in the meeting. It is intended that the meetings will be visually broadcast via YouTube and the broadcast will be available live on the Authority's website.

This meeting will take place at Aldern House, Baslow Road, Bakewell, DE45 1AE.

Aldern House is situated on the A619 Bakewell to Baslow Road. Car parking is available. Local Bus Services from Bakewell centre and from Chesterfield and Sheffield pick up and set down near Aldern House. Further information on Public transport from surrounding areas can be obtained from Traveline on 0871 200 2233 or on the Traveline website at www.travelineeastmidlands.co.uk.

Please note that there is no refreshment provision for members of the public before the meeting or during meeting breaks. However, there are cafes, pubs and shops in Bakewell town centre, approximately 15 minutes walk away.

To: Members of National Park Authority:

Chair: K Smith
Deputy Chair:

N Adams	M Beer
R Bennett	P Brady
J Brown	M Buckler
M Chaplin	Prof J Dugdale
C Farrell	C Greaves
A Gregory	B Hanley
A Hart	L Hartshorne
I Huddleston	C Kelly
S Mabbott	A Nash
C O'Leary	K Potter
V Priestley	K Richardson
K Rustidge	Dr R Swetnam
S Thompson	J Wharmby
Y Witter	A Martin

Other invited Members: (may speak but not vote)

Constituent Authorities
Secretary of State for the Environment
Natural England

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MINUTES

Meeting: **National Park Authority**

Date: Friday 9 May 2025 at 10.00 am

Venue: Aldern House, Baslow Road, Bakewell

Chair: K Smith

Present: J W Berresford, M Beer, P Brady, M Buckler, M Chaplin, Prof J Dugdale, C Farrell, C Greaves, B Hanley, L Hartshorne, I Huddleston, A Nash, C O'Leary, K Potter, V Priestley, K Richardson, K Rustidge, Dr R Swetnam, S Thompson, Y Witter and A Martin

Apologies for absence: R Bennett, A Gregory and A Hart.

43/25 APOLOGIES FOR ABSENCE

On behalf of all Members, the Chair passed on their best wishes to Cllr Hart for a speedy recovery following his recent operation.

44/25 MINUTES OF PREVIOUS MEETING HELD ON 21 MARCH 2025

The minutes of the last meeting of the National Park Authority Meeting held on 21st March 2025 were approved as a correct record.

45/25 URGENT BUSINESS

There was no urgent business.

46/25 MEMBERS DECLARATIONS OF INTEREST

There were no Member declarations of interest.

47/25 PUBLIC PARTICIPATION

No members of the public were present to make representations to the Committee.

48/25 CHAIR'S BRIEFING

The Chair provided the following verbal update to Members in addition to the weekly briefing meetings with the Chief Executive and Deputy Chair, and attendance at the Planning and P& R Committees.

- Attended a National Parks Partnership AGM at the end of March to discuss the alterations to the banking arrangements and authorizing particular users of credit cards.
- Interviewed at the beginning of April as part of the assessment for the Investments in People Programme. The results of the assessment are not known yet, but the Authority is hoping to maintain at least the position as a silver award holder.
- On the 4th April, together with the Deputy Chair, held an introductory meeting with Dan Smart the Business Transformation Manager.
- On the 7th & 8th April with the CEO, attended a National Parks England Meeting organised by the South Downs National Park.
- On the 9th & 26th April, attended a Youth Impact Collective Workshop. The 9th being an online session, then the 26th being a face to face workshop at Aldern House, which was also attended by a number of Members.
- Attended a meeting on the 22nd April with the CEO and Victoria Peel (Executive Support Officer) to discuss the Authority's input into the Secretary of State appointments recruitment campaign, and to finalise arrangements for the subsequent conference of National Parks Chairs and Chief Executives, which was held at Aldern House.

The Secretary of State appointments advert is now live on the DEFRA website for our two vacancies, and the closing date is quite soon. The Chair & CEO have already had conversations with a number of interested people, so we are anticipating a good number of applications. The interview dates have yet to be agreed, but possibly late June/early July, which will mean that they will possibly not be appointed in time for the Authority AGM on the 11th July.

- On the 24th April, together with the CEO, attended the 60th Anniversary celebrations of the creation of the Pennine Way in Hawes in the Yorkshire Dales National Park, this was also attended by a number of Rangers from the Peak District, and ex Rangers that came together as part of the celebration.
- On the 30th April, together with the CEO, attended and spoke at a meeting attended by 20 DEFRA officials at Castleton Visitor Centre. The majority of the attendees were those that are involved with the Access for All initiatives and FiPL.
- On the 1st and 2nd May together with the Chairs and CEO's of the 15 UK National Parks, visited Cressbrook Bridge, Mam Tor and Chatsworth with presentations on AI, National Issues, and National Parks Partnership Branding.

49/25 CHIEF EXECUTIVE REPORT (PM)

The Chief Executive delivered the following updates to his report:

- The Investment In People award has been confirmed and the CEO will be informing staff at the All Staff Briefing which is on the 21st May.
- The brochure for new Members has now been produced, and following the recent Council elections, we will have some new Members from our local authorities. The brochure will help the new Members see what's involved in being on the Authority.
- Sustainable Hayfield have held a series of talks and the CEO presented at one of these with over 70 attendees, with a chance to talk about nature and climate and the work that the Authority does.
- Awaiting the consultants report on the Youth Voice and Youth Impact Collective, and on how we take that forward.

- Paul Hamblin Award was presented to Sue Smith for her access work. Paul was fundamental in creating National Parks England, who tragically died very young, so his family created an award in his name. There is a video clip by Tony Gates, CEO of Northumberland National Park talking about Paul, and it shows David Butterworth from the Yorkshire Dales National Park who nominated Sue for the award, presenting it to her, so all Members are encouraged to watch it.
- Visited Horseshoe Quarry to look at a FiPL funded access project. The former quarry, owned by the British Mountaineering Council, is popular with climbers, so the path has been smoothed and accessible gates have been installed. The work was done by the CMPT, with funding from FiPL.

Members thanked both the Chair and the CEO for their reports, and asked whether the Authority was getting traction with DEFRA and the MP's, and were they listening and understanding?

It was reported that it was useful having the recent DEFRA visit, which provided an opportunity to talk informally to people who did have positions of influence, and to reiterate what the impacts of decision making were having on the National Parks. It was important to keep on engaging with them and making our case for funding allocation. National Parks need to be more creative and extra capital funding has been made available to help with nature recovery or income generation.

Members noted that the Authority was seen as a trusted partner, so we could be confident that the endeavours we were putting into trying to get traction worked, as we are successful in getting FiPL funding as well as the Landscape Observatory Funding, so it showed we did have a good track record in the monies that we did receive.

RESOLVED:

To note the report.

50/25 TOURISM CHARTER

Phil Mulligan, CEO presented the report and reminded Members that the Charter was reworked after the Forum discussion, so the recommendation was to adopt the Charter and to get partners to sign up to it, together with the action plan.

Members asked why the National Parks England report on Regenerative Tourism in UK National Parks was not referenced as that report had a different feel and emphasis to the Tourism Charter. The CEO reported that the Authority's' Tourism Charter had a different emphasis as it was about managing visitor pressure, whereas Regenerative Tourism was based in the concept of tourists actively participating in improving the environment of the place they visit.

Members asked what the next steps would be? How would we get partners to sign up to it and would we be getting the Parish Councils involved? The CEO reported that he would be happy to take the Charter to the Parishes to sign up to through the Parishes Forum and to every meeting he attended as the next steps were really important.

Although the Charter was welcomed by Members which made good points, there was concern around some of the wording and it was considered more work was needed to get the message across to key partners who have just changed political control following the local elections to get their support. The CEO reported that the Charter was to reach out to as many people as possible as there were those that wanted more tourism within

the Park and those who wanted less so it was trying to find a balance to get people engaged and on board, taking into account the National Park purposes which should be the centerpiece of the Charter.

When asked if an update could be brought to a future Authority Meeting, the CEO agreed that this would be done at an appropriate time.

The CEO thanked Members for their feedback and agreed that he could tweak some of the wording but was concerned that this could mean the risk of not passing the Charter, to then bring it back to Members and delaying getting on with it.

The Chair agreed that tweaking of some of the words could be done to reflect some of the comments that Members had made by way of a second recommendation, to allow for delegation to the Chief Executive in consultation with the Chair of the Authority to agree the document.

The recommendation as set out in the report, subject to an additional recommendation was moved, seconded, voted on and carried.

RESOLVED:

- 1. That approval be given to adopt the Tourism Charter, as set out in appendix 1 of the report.**
- 2. That Authority be delegated to the Chief Executive in consultation with the Chair of the Authority, to review the presentation of the document as agreed.**

51/25 ACTIVE TRAVEL PLAN

This item was brought forward on the agenda.

The Head of Planning reminded Members that this item was discussed at the Member Forum in March, where he explained the consultation process to that point and the intention to bring a final plan back to Members for adoption, including our proposed routes which would form part of the high level strategic network for active travel.

The Officer also informed Members of a small correction to 2.6 of the report which should have read "Walking, Wheeling Cycling and Horse Riding."

The Officer then handed over to the Transport Policy Planner and Access & Rights Way Officer who then gave a presentation to Members on the year long project using Active Travel England money to produce an Active Travel Plan for this area.

Members thanked the Officers for their presentation, and the amount of work that had gone into the project, looking at our ambitions and working with partners to implement active travel throughout the National Park.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

1. That subject to recommendation 2 below, the Peak District Walking, Wheeling, Cycling and Horse-Riding Infrastructure Plan, be adopted by the Authority and thereafter published
2. That authority be delegated to the Head of Planning in consultation with the Chair and Vice Chair of the Authority, for further additions and amendments and any specific feedback received from Active Travel England to finalise the Plan.
3. That progress reports and future updates on active travel and the Plan be reported to future meetings of the Authority.

The meeting adjourned at 11:30 and reconvened at 11:40

52/25 INTERNAL AUDIT PLAN 2025-26

The Finance Manager and Stuart Cutts, Assistant Director-Audit Assurance at Veritau, were present to answer any questions or queries.

Members asked for clarification regarding the internal audit plan of works that was prepared on the basis of a risk assessment, and whether it was the same as the risk register that was in the corporate strategy, and how did it come about in deciding what the priorities were, and there was some concern on the amount of work on the work programme for the year.

The Officer confirmed that the risk assessment came about following conversations with Stuart from the Auditors, the Finance Manager and the Monitoring Officer throughout the year regarding areas that was felt needed attention as the Finance team is small and we view the Internal Auditors as supplementary to the team. As regards to work prioritisation, 35 days are allocated each year to finalising the audit with Stuart, but they have restructured the 2025/26 plan for next year so it is not as onerous, alongside year end..

Members asked whether the Authority liaised with the External Auditors on what the Authority was going to focus on with the Internal Auditor and also whether the Internal Auditor was asked to look at the reserve appropriation? The Officer reported that the reserve appropriation had been completed by the Internal Audit on the 24/25 plan and that that report would be presented to Members in July. As regards to External Audit, the External Auditor confirmed that mandatory risk controls is a mandatory risk on all audits and it wasn't something that was particularly lacking at the Authority.

The recommendation as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

That the Internal Audit Plan for 2025/26 be approved.

53/25 EXTERNAL AUDIT - 2024/25 AUDIT STRATEGY

Jennie Norman, Audit Manager at Mazars, was present to answer any questions or queries.

Members queried the fees charged by the External Auditor and asked whether they audited any other of the National Parks? Jennie confirmed that they do indeed audit other National Parks eg. Loch Lomond, and various others and as they are a public sector team they are always looking at sharing knowledge. As for the fees, these are not set by the Auditors but by the PSAA

Members were concerned on the 150% increase in the fees in the Audit Service Contract in 2023/24? Jennie confirmed that there was an exceptional backlog in Local Government audit which had built up principally from 2019 onwards, and reached its peak in the 23/24 year. The government then brought in measures to clear the backlog, so that is why the fees were much higher in 2023/24 and 2024/25.

The recommendation as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

That the 2024/25 External Audit Strategy Memorandum for the 2024/25 Statement of Financial accounts be noted.

54/25 ESTABLISHING RESOURCES COMMITTEE & MINOR ADDITIONS TO PLANNING COMMITTEE

Members were informed of a minor amendment to item 5d on page 83 of the report which should have read “making on sound decisions”.

Members then queried as to whether it was acceptable that Finance and Audit could be combined into a single meeting as they are usually separate committees, and this is seen as best practice because the role of audit is to provide assurance that the financial management system is working and was it compliant with CIPFA rules?

The Authority Solicitor & Monitoring Officer informed Members that approval of the budget and the capital programme are specifically reserved to the Full Authority and that was in the Terms of Reference and it was that Committee that scrutinised those finances.

The Head of Resources confirmed that there is a group of Members that sit on the Audit, Budget and Project Risk Monitoring Group which is not a Committee. The only difference is that the Authority is pulling that group of Members into a Committee process so that it is all full and open and transparent, so there will be no difference, it is just putting it into a different system of working.

The Chair asked both the Internal and External Auditors whether there was or wasn't a problem with Members sitting on both Committees and was there anything from their perspective that caused concern? The Auditors asked to reserve judgement on this as they would need to look into the CIPFA guidance further and report back.

The Chair of P&R confirmed that the recommendations and the amendments was to ensure we have better Member scrutiny in key areas and not wasting everybody's time by having more meetings than was needed for both Officers and Members. The programmes element of the P&R Committee was to ensure that it was aligned to the four management aims and that they're things that all Members should know about. The Governance Working Group worked with Officers to come up with a set of proposals to put a more coherent resource into the Resources Committee, which will mean that there

will be a greater number of people to scrutinise the finance and audit elements before bringing a recommendation to be approved by Full Authority.

Members agreed to support the recommendation, and to look at this again if the Auditors come back to Officers after checking the CIPFA guidance.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

- 1. That the Resources Committee Terms of Reference in Appendix 1 are approved.**
- 2. That the Resources (Hearing) Sub-Committee Terms of Reference at Appendix 2 are approved.**
- 3. That the Planning Committee Terms of Reference at Appendix 3 are approved.**
- 4. That the matters specifically reserved to be exercised by a meeting of the full Authority at Appendix 4 are approved.**
- 5. That authority be delegated to the Monitoring Officer, in consultation with the Chair of the Authority, to make the required amendments to Standing Orders to bring recommendations 1, 2 and 3 above into effect.**
- 6. That authority be delegated to the Monitoring Officer to allocate Members to the Resources (Hearing) Sub-Committee as and when required.**
- 7. That dates for the Resources Committee meetings, at Appendix 5, and appointments to the Resources Committee will be made at the July 2025 Annual General Meeting are noted.**
- 8. That the proposal to convene additional Member Forum meetings to be held virtually as required throughout the year is agreed.**

55/25 MEMBER TRAINING AND DEVELOPMENT 2025-26

The Head of Resources was present to answer any questions or queries.

There was some concern that Members would not be able to participate at Committees if they had not completed the training first, but could take part in a Full Authority meeting which didn't make sense, and should this rule be the subject of a committee resolution?

It was confirmed that the report should be clear and read all Authority and Committee meetings. It was essential that all new Members completed the training to ensure they can participate fully in meetings, understand the role of the Authority and its code of conduct and procedures, and this could not be done if a Member had not gone through the training. Members agreed that it was important that any Member that sits on the Planning Committee, must first undergo the planning training before they can participate in the Planning Committee, to ensure that the right issues are addressed when reviewing a planning application.

The Officer informed Members that the Training Development Framework was approved at the Authority Meeting on the 26 July 2024, to ensure that the Authority is following best practice and making robust decisions at all committees.

It was noted that for new Members the training is very useful and important and helps Members to understand how they contribute and what the boundaries are. Being a Member on the Authority is a privileged position so it is important that all Members are trained to ensure correct decision making.

The CEO reported that he had recently had a call with East Midlands Councils (EMC) where this item was discussed. The EMC are keen on all newly elected Councillors to complete the training which only takes half a day to complete, before they start making decisions, so he supported the training being compulsory for the Full Authority as well as Committees, because the Members are making important decisions.

Members asked that where a date of a meeting has changed and a Member then cannot attend as they have already arranged other things, then this did not count as showing as a non attendance as it was not the fault of the Member. The Authority Solicitor & Monitoring Officer confirmed that it has been agreed that the Authority would provide two sets of training statistics for Members, one of which would explain those meetings that were not scheduled so it was clear.

Members asked whether it was possible for the Member computer training to be added to a future Forum agenda? The Chair confirmed that he would discuss this with the CEO and Officers to see if this was possible.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

- 1. The 2025-26 programme of Member training and development events, as set out in Appendix 1 of the report, is approved.**
- 2. To confirm that in person attendance at training and development events are approved duties for the payment of travel and subsistence allowances as set out in Schedule 2 of the Members' Allowances Scheme.**

56/25 NATIONAL PARK MANAGEMENT PLAN - PROGRESS REPORT 2024-25

The Data, Strategy & Performance Officer and Strategy & Performance Manager were present to answer any questions from Members.

Members commended Officers on the work that had gone into the progress report, but given the much reduced Engagement Team and new administrations in Derbyshire County Council etc how is the Authority going to manage all this change?

The Officer confirmed that there have been a lot of changes and this would impact on how we work as an Authority and with our Partners through the National Park Management Plan (NPMP). The Officer reported that the recent NPMP delivery group discussed the challenges to delivery and that the group are very engaged in discussing how we address this as a partnership.

Members asked how the Authority tracked individual action points and aims that we have set ourselves, and whether we are actually going to achieve the higher level objectives

and aims, and whether they should be put on the Risk Register in the short term, as there is clearly a risk that the Authority is not going to deliver the high level objectives. The Officer reported that one of the things that had been found with the Risk Register was that it covers a combination of three different sets of risks: risk to the place (the National Park), Management Plan delivery risks and organisational risks. The Officers are looking at allocating time into this in the coming year to support better risk communication and management.

Members were concerned that the Management Plan report makes it appear that the Authority is comfortably delivering on all aspects of the plan. The Government could review and decide that the Authority didn't need any further resources, so not having the high level risks could prove funding was needed. The CEO responded that the funding was at risk because we were not delivering and not because we are, and if we are honest about what we are not delivering on then why would the Government then put money into National Parks. It's about making the case and showing what we are delivering.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

- 1. The National Park Management Plan Progress Report 2024/25 is approved.**
- 2. The implementation of any required amendments to the Progress Report 2024/25 be delegated to the Head of Resources.**

57/25

AUTHORITY PROGRESS REPORT - TURN OF YEAR (DECILE 4) 24-25 WITH PERFORMANCE AND BUSINESS PLAN 24/25 INCLUDING CORPORATE RISK REGISTERS

The Date, Strategy & Performance Officer was present for this report to answer any questions.

The Officer reported of an addition in that she was hoping to have got the CEO's update summary to be added in time for today's meeting. It will be added following the meeting.

Members asked what the Warslow Moors Estate Plan covered and has the gap in staffing resources now been filled, and will that be achieved in 25/26 as indicated? The CEO reported that an contractors had been engaged to give interim capacity in estate management for 6 months to progress the urgent work and to catch up, and recruitment will be continued to find a permanent solution.

The Head of Assets confirmed that she will be leading on the Estate Management Plan and this will be an item on a Member Forum as part of the Asset Management Plan which will look at intrinsic aspects on the vision for the estate and the Authority wishes to deliver that.

The Chair reported of an amendment to the 2nd recommendation where it talks about proposed 24/25 and it should be proposed 25/26.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

1. The digital Authority Progress Plan Report (Decile 4) 2024/25 is approved.
2. The Performance and Business Plan which includes the turn of year (24/25) and proposed (25/26) corporate risk registers are approved.
3. That authority be delegated to the Head of Resources to complete the details of the Performance and Business Plan to allow for full publication by the statutory deadline of 30 June 2025.

A vote to continue the meeting past three hours was carried.

58/25 WARSLOW MOORS ESTATE, PUMP FARM, WARSLOW - LETTING OF PUMP FARM

The Head of Assets was present for this item and to answer any questions from Members.

Members asked whether a business case had been made for separating Lot 1 and Lot 2? The Officer responded that the business case was done as a whole but with the potential to let them as two separate entities, so when the tenders are submitted that will be the acid test of the financial interrogation. What the Authority needs to be certain of in the decision making that an opportunity hasn't been missed by letting the farmhouse out in isolation because it could generate more income.

The CEO reported that the Pump Farm Farmhouse had decades where it had had no investment at all due to the tenants not wanting any investment being put into the property, which would have meant their rent increasing, so the Authority has now brought it up to a standard for letting.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

1. To amend the second resolution of the Authority, Minute 51/23, to the following:
"To modernise the farmhouse and erect two new farm buildings prior to re-letting the holding as a whole or in two parts, on either of the following bases:
 - Option (a) – if Lots let to separate tenants
Lot 1: (Farmhouse and garden) on a residential tenancy for a maximum term of 2 years 364 days, with a break clause at 18 months
Lot 2: (Land and buildings) on a Farm Business Tenancy (FBT) of 5 years (minimum) to 6 years 364 days (maximum).
OR
 - Option (b) – if both Lots let to the same tenant
Lots 1 and 2: on a Farm Business Tenancy of 5 years (minimum) to 6 years 364 days (maximum)."
2. To delegate authority to the Head of Assets and Enterprise, in consultation with the Chair and Vice-Chair of the Programmes and Resources Committee (or any equivalent committee), and subject to the

satisfaction of the Authority Solicitor and the Finance Manager, to let Pump Farm under either Option (a) or Option (b) above, to the highest scoring tenderer, following the completion of a fair and transparent competitive tendering and evaluation exercise.

3. To delegate authority to the Authority Solicitor to enter into and determine the terms and conditions of the letting(s) in accordance with the procurement exercise and in the best interests of the Authority.

59/25 LANDSCAPE OBSERVATORY FUNDING 2025-26

The Strategy & Performance Manager was present for this report and to answer any questions from Members.

The Officer informed Members that this was a good news item not only for the Authority as an organisation but for the National Parks family, and had come about as a result of 2-3 years of work by the Strategy and Performance Team and academic partners

The Chair also expressed his thanks to Jane Butler and National Parks England as she was the one that kept the door open with DEFRA and managed to get £500,000 in funding for the project.

Members asked whether there was an opportunity to talk to other local authorities? The Officer reported that the funding received thus far was for protected landscapes, but the plan is for the project to run over 3-4 years if the first year is successful and it is hoped will expand in coverage. Similar discussions will take place with Scotland and Wales to expand the area of work if funds can be found.

Members asked what the plans would be for the Board and Steering Group and were there plans to involve Members and how would the governance develop? The Officer reported that the Board would be chaired by Jane Butler in the first instance, supported by a couple of key academics, as well as someone from DEFRA and Natural England and they would oversee the three main project elements which are the AI Project, Trialling of Rapid Condition Assessment of Landscape Features and Management Planning, but as it's a National Project, it doesn't member involvement had yet to be considered. The project, and its governance, are evolving rapidly.

The recommendations as set out in the report was moved, seconded, voted on and carried.

RESOLVED:

1. That acceptance of funding for the Landscape Observatory project, as described in this report, of up to £550,000 for 2025-2026 is approved. Approval of the terms of funding is delegated to the Head of Resources in consultation with the Finance Manager/Chief Finance Officer (or such other person appointed under S151 of the Local Government Act 1972).
2. That authority be delegated to the Authority Solicitor to enter into and determine the terms and conditions of the funding agreement for the project in the best interests of the Authority.
3. That approval be granted to incur expenditure up to £550,000 as detailed in the report, pursuant to Part 3, C3.(c) of Standing Orders, subject to compliance with the Contract Procedure Rules and Standing Orders

generally.

4. That authority be delegated to the Authority Solicitor to enter into and determine the terms and conditions of any contracts and/or agreements required for the project, subject to compliant procurement exercises being carried out as required in line with Standing Orders and in the best interests of the Authority.
5. That this project be monitored by the Audit, Budget, and Project Risk Management Group or any equivalent group or committee.

60/25 REPORT FROM THE CHAIR OF PROGRAMMES & RESOURCES COMMITTEE - VERBAL UPDATE

The Chair of Programme & Resources Committee gave a verbal update from the committee held on the 25th April where the following reports were up for approval:-

3 reports from the Head of People Management:

- Safeguarding
- Occupational Health, Safety and Wellbeing
- Diversity

The forthcoming diversity objectives for the Authority were also approved which will be presented annually to the committee for approval.

A proposal to receive up to £350,000 for further Access to All Funding was also approved to enable the Authority to continue progress in this area.

2 Management Plan themes were also looked at, Landscape & Nature Recovery, which included presentations on FiPL progress and the Morridge Hill Project and the Welcoming Place, where a range of things were looked at which included Peaks for Health, Ambassador Schools and Youth Voice as well as other areas that the Engagement Team have been working in.

The P&R Committee also asked that special thanks be given to the Engagement Team for their dedication to progress during what has been a difficult time due to the restructuring process.

The Chair then encouraged all Members to review the P&R Committee Papers on the Management Plan Aims.

61/25 REPORT FROM THE CHAIR OF PLANNING COMMITTEE - VERBAL UPDATE

The Chair of the Planning Committee gave an update on the last planning committee and some of the planning decisions taken.

There were 3 applications that had been referred back to the April Planning Committee as departures from policy, these were all subsequently approved by Members. There was also a progress report from planning enforcement which showed good promise, despite the team being down by a Planning Enforcement Officer and a Junior Solicitor.

62/25 REPORTS FROM OUTSIDE BODIES - NONE SUBMITTED

No reports had been submitted.

63/25 EXEMPT INFORMATION S100(A) LOCAL GOVERNMENT ACT 1972

RESOLVED:

That the public be excluded from the meeting during consideration of agenda item 22 to avoid the disclosure of Exempt Information under S100 (A) (3) Local Government Act 1972, Schedule 12A paragraph 3 “information relating to the financial or business affairs of any particular person (including the Authority holding that information)”.

64/25 EXEMPT MINUTES FROM THE PREVIOUS MEETING HELD ON THE 21 MARCH 2025

The exempt minutes of the last meeting of the National Park Authority Meeting held on 21st March 2025 were approved as a correct record.

The meeting ended at 1.15 pm

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MINUTES

Meeting:	National Park Authority
Date:	Friday 20 June 2025 at 9.30 am
Venue:	Aldern House, Baslow Road, Bakewell
Chair:	K Smith
Present:	J W Berresford, M Beer, R Bennett, P Brady, M Buckler, C Farrell, C Greaves, L Hartshorne, I Huddleston, A Nash, K Potter, K Richardson, Dr R Swetnam, S Thompson and A Martin
Apologies for absence:	M Chaplin, Prof J Dugdale, A Gregory, B Hanley, A Hart, C O'Leary, V Priestley, J Wharmby and Y Witter.

65/25 URGENT BUSINESS

There was no urgent business to discuss.

66/25 PUBLIC PARTICIPATION

No members of the public were present to make representations to the Committee.

67/25 MEMBERS DECLARATIONS OF INTEREST

There were no Members declarations of interest.

68/25 RESOURCES COMMITTEE

Prior to this item being discussed the Chair congratulated Y Witter who was mentioned in King's birthday list and received an MBE for her work with Mosaic in Sheffield and across the Peak District.

A motion to approve the recommendation as set out in the report, with the addition that the Terms of Reference be kept under review for the next year was moved and seconded, put to the vote and carried.

RESOLVED

- 1. That the Resources Committee Terms of Reference in Appendix 1 are approved.**
- 2. That the Resources Committee Terms of Reference are continuously reviewed throughout the year.**

The meeting ended at 9.45 am

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REPORT OF THE MEMBER APPOINTMENT PROCESS PANEL

1. Purpose of the report

To appoint the Chair and Vice-Chair of the Authority's two standing Committees, Planning Committee and Resources Committee, to consider the Authority's 2025/26 appointments to Committees, Steering Groups, Panels, Advisory Groups and appointments to Outside Bodies.

Key Issues

- In accordance with the Authority decision to establish a Member Appointment Process Panel, the Panel invited Members of the Authority, on 12 June 2025, to indicate whether they wish to stand for appointment to key positions and their preferences for Committee Membership. The Panel have considered the responses received in the context of the agreed appointment principles.
- The report of the Panel is attached as Appendix 1. Members are asked to consider the report when agreeing the appointments set out in recommendations 1 to 5 below. (The references in brackets relate to sections A to D in Appendix 1).
- The report of the Panel is a summary of responses received it is not a recommendation from the Panel.

2. Recommendations

- 1. To confirm the Authority's previous decision to set the size of the two Standing Committees to 15, with 8 Local Authority Members and 7 Secretary of State Members and allocate Local Authority places on Planning Committee as set out in Section B (i) of Appendix 1 with an additional place on the Resources Committee to accommodate the Chair of the Authority if required.**
- 2. To appoint Members as Chair and Vice Chair of the Planning Committee and Chair and Vice Chair of Resources Committee until the annual Authority meeting in July 2026 [Section A]**
- 3. To appoint Members to the Planning Committee and the Resources Committee until the annual Authority meeting in July 2026. [Section B (i) and B (ii)].**
- 4. To appoint the following until the annual Authority meeting in July 2026:**
 - a) 5 Local Authority Members and 4 Secretary of State Members to the Local Joint Committee. [Section B (iii)]**
 - b) 5 Local Authority Members and 4 Secretary of State Members to the Appeals Panel. [Section B (iv)]**
 - c) 3 Local Authority Members and 3 Secretary of State Members to the Investigatory and Disciplinary Committee [Section B (v)]**
 - d) 1 Member and 1 Deputy to the Due Diligence Panel. [Section C (i)]**
 - e) 8 Members (4 Local Authority Members and 4 Secretary of State Members) to the Governance Review Working Group. [Section C (ii)]**
 - f) The Chair & Vice Chair of Planning Committee, Chair of Authority and 6 other Members to the Local Plan Review Member Steering Group. [Section C (iii)]**
 - g) 4 Members (2 Local Authority Members, 2 Secretary of State Members) and 2 Reserve Members to the Member Appointments Process Panel [Section C (iv)]**

- 5. To appoint Members to the 18 Outside Bodies set out in Section D of Appendix 1 until the annual Authority meeting in July 2026.**
- 6. To confirm that all these appointments are approved duties for the payment of travel and subsistence allowances as set out in Schedule 2 of the Members' Allowances Scheme.**

How does this contribute to our policies and legal obligations?

3. Standing Order 1.39(1) Part I requires the Authority at the Annual Meeting to appoint Members to be the Chair and Vice Chair of each Standing Committee. Appointments made will continue until the next Annual Meeting unless a Member resigns from the office or resigns their membership of the Authority.
4. The Environment Act 1995 requires that membership of the Committees should as far as possible reflect the makeup of the membership of the Authority. This means that each Committee should, in most cases, have a majority of Local Authority appointed Members over the Members appointed by the Secretary of State, which includes Parish Members. There are a few exceptions where due to rounding up and rounding down the numbers from each category are equal. This principle is also considered when setting up an Appeals Panel.

Background Information

5. The Authority established a Member Appointments Process Panel to assist with appointments to key positions at the Annual Meeting. For this year K Richardson, Y Witter and Dr R Swetnam, were appointed as Panel Members, with K Rustidge and A Gregory as reserve Panel Members.
6. The purpose of the Panel is to:
 - invite, receive and consider expressions of interests from Members in the annual appointments;
 - apply the agreed appointment principles to identify any issues that conflict with the agreed principles;
 - contact relevant Members to discuss and resolve issues if possible;
 - compile a list of candidates for the appointments for consideration at the Annual meeting.
7. As part of the process the Panel contacted Members of the Authority on 9 May to request their expressions of interest in the annual appointments. The Panel met on 12 June to consider the responses and check them against the appointment principles. The principles are available to view here [The Appointment Principles: Peak District National Park](#)
8. After considering the responses against the principles the Panel has produced a report, Appendix 1, which sets out a summary of the responses received. Where more than one Member has expressed an interest in a role all the names put forward have been included in Appendix 1 and where a vote is needed this is highlighted in the proposals section below. The intention of the Panel's report is to help improve the efficiency of making annual appointments however the Authority cannot prevent any Member from standing for appointment even if they have not given the Panel advance notice of their intentions.
9. Standing Orders state that when more than one Member is standing for a Chair or Deputy/Vice Chair position the voting must be carried out by ballot of all Members present at the meeting. The Authority may also decide to carry out a ballot for other appointments if the majority of Members present agree. Should the need arise ballot

papers are available for Members as required.

10. The Panel also considered point 6 in the Principles regarding the responsibility of nominated Members to demonstrate interest and potential and show that they understand what is required of them. With this in mind the Panel have asked that candidates for the Chair and Vice-Chair positions to supply a written statement of not more than 500 words in support of their expression of interest and those received will be circulated in advance of the meeting.

Proposals

Appointment of Chairs and Vice Chairs of Planning Committee and Resources Committee. (Recommendation 2)

11. Section A of the Panel's report sets out the names of those Members who have expressed an interest in the roles of Chair and Vice-Chair of the two standing committees. All named Members interested in the roles of Chair and Vice Chair of Planning Committee and Chair and Vice Chair of Resources Committee comply with Principle 3, as they have not exceeded the maximum continuous period of holding any one office for four continuous terms.
12. Two Members have expressed an interest in the role of Vice Chair of Planning Committee. If at the time of the meeting there are 2 Members to be considered, and they are both proposed and seconded, the Authority will need to make sure there are no further expressions of interest and carry out a ballot for the appointment.

Appointments to Planning Committee and Resources Committee. (Recommendations 1 and 3)

13. Section B of the Panel's report sets out suggested Membership of Committees and Panels based on the preferences of individual Members and the nominations received for the key positions above. Sections B (i) and B (ii) refer specifically to membership of the Authority's two Standing Committees.
14. Standing Order 1.40 sets out the arrangements for appointing Members to Standing Committees including that both Local Authority Members and Secretary of State appointed Members must be appointed to Committees in the same proportion as the membership of the Authority. This is a requirement of the Environment Act 1995 which means that with a Committee size of 15 there should be one more Local Authority than Secretary of State appointed Member on each Committee.
15. The proposed Committee Membership as in sections B (i) and B (ii) of Appendix 1 are based on the previous Authority decision to fix the Standing Committees at 15 Members, with 8 Local Authority Members and 7 Secretary of State Members. Before appointing to the Planning Committee, the Authority will be asked to confirm the allocation of Local Authority Members places by appointing Authorities, as set out in section B (i) of Appendix 1. For the previous 4 years the size of the Programmes and Resources Committee has been increased by 1 to 16 so that the Chair of the Authority can be appointed to both Committees. K Smith has asked that, if he is re-appointed as Chair of the Authority, this increase is continued for the Resources Committee. Recommendation 1 refers to this.
16. There is expected to be 2 Secretary of State Member holding vacancies on the Resources Committee, due to the resignation of a Member from the Authority and the end of term of office of a Member, until new appointments have been made by Defra.

**Appointments to Committees, Steering Groups, Panels and Advisory Groups.
(Recommendation 4)**

17. Sections B and C of the Panel's report set out the suggested membership of Committees, Steering Groups, Panels and Advisory Groups based on the preferences of individual Members and the expressions of interest received for the key positions. If no changes are needed at the meeting the appointments may be approved as proposed subject to the following issues identified by the Panel being addressed.
18. The Panel have identified there that are still vacancies to be filled on the Local Joint Committee, the Appeals Panel, the Investigatory and Disciplinary Committee, the Due Diligence Panel, the Governance Review Working Group, the Local Plan Review Member Steering Group and the Member Appointments Process Panel. All these vacancies are highlighted in Appendix 1.

Appointments to Outside Bodies (Recommendation 5)

19. This year there are 18 Outside Bodies to be appointed to and these are listed in Section D of Appendix 1. For each Outside Body how many Members and Deputies the Authority is able to appoint and details of Members who have expressed an interest in being appointed to that body are identified. Where there are more Members interested than there are places or Members have not expressed a preference for being the Member or a Deputy a vote will need to be taken to allocate the places. It is proposed that the Chair asks if there are any further expressions of interest for uncontested places and seeks nominations for the vacancies identified, asks the Authority to vote on contested places and then asks the Authority to approve the appointments as one block.

Are there any corporate implications members should be concerned about?

Financial:

20. A Special Responsibility Allowance is paid to the Chair, Deputy Chair and Vice-Chair roles and Members may claim travel and subsistence for attendance at duties relating to the appointments made. These costs are included in the 2025/26 budget so the appointments do not incur any additional cost to the Authority.

Risk Management:

21. There are no apparent risks.

Sustainability:

22. There are no issues to highlight.

Equality, Diversity and Inclusion:

23. Members have the opportunity to seek appointments to all the available positions.

24. Climate Change

Every meeting of the Authority has its own Carbon footprint in terms of arrangements such as meeting papers, providing food and refreshments and where Members use private transport to travel to and from meetings. Scheduling meetings around key business needs and trying to hold several meetings on the same day aims to minimise the impact.

25. Background papers (not previously published)

None.

26. Appendices

Appendix 1 - Report of the Member Appointment Process Panel 2025.

Report Author, Job Title and Publication Date

Sarah Adams, Senior Business Centre Adviser, on behalf of the Member Appointment Process Panel, 03 July 2025.

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A) Appointment of Authority Chair & Deputy Chair, Committee Chairs and Vice Chairs¹

Authority	
Chair ² : K Smith	Deputy Chair ³ : Prof Janet Dugdale
Planning Committee	
Chair ⁴ : P Brady	Vice Chair ⁵ : P Brady or V Priestley
Resources Committee	
Chair ⁶ : C Greaves	Vice Chair ⁷ : A Nash

Notes

¹ As paragraph 4 of the appointment principles suggests that the Authority should seek to achieve a balance across appointments so throughout this report Council Members are highlighted in **blue** and Secretary of State Members in **red**. Where it appears that a position will be contested the names of the candidates are highlighted in **bold**. Standing Orders 1.12(3) and (4) state that voting for the Chair and Deputy Chair roles will be by ballot. When there are more than two persons nominated and, of the votes given, there is not a clear majority in favour of one person, the person having the least number of votes shall be removed from the list and a fresh ballot taken. In the case of an equality of votes for two or more candidates the Chair shall have a second or casting vote.

² There is one candidate for the role of Chair of the Authority. K Smith meets the criteria set out in the appointment principles. If no further candidates are nominated and seconded at the meeting the appointment can be made by a show of hands however if there are more nominations, which are seconded, then a ballot will be required.

³ There is one candidate for the role of Deputy Chair of the Authority. Prof J Dugdale meets the criteria set out in the appointment principles. If no further candidates are nominated and seconded at the meeting the appointment can be made by a show of hands. However, if there are more nominations, which are seconded, then a ballot will be required.

⁴ There is one candidate for the role of Chair of the Planning Committee. P Brady meets the criteria set out in the appointment principles, if no further candidates are nominated and seconded at the meeting the appointment can be made by a show of hands. However, if there are more nominations, which are seconded, then a ballot will be required.

⁵ There are two candidates for the role of Vice-Chair of Planning Committee. All candidates meet the criteria set out in the appointment principles. If two or more of the candidates for the role of Vice Chair of Planning Committee are proposed and seconded then a ballot will be held.

⁶ There is one candidate for the role of Chair of the Resources Committee. C Greaves meets the criteria set out in the appointment principles, if no further candidates are nominated and seconded at the meeting the appointment can be made by a show of hands. However, if there are more nominations, which are seconded, then a ballot will be required.

⁷ There is one candidate for the role of Vice Chair of the Resources Committee. A Nash meets the criteria set out in the appointment principles, if no further candidates are nominated and seconded at the meeting the appointment can be made by a show of hands. However, if there are more nominations, which are seconded, then a ballot will be required.

B) Appointment of Committees, Steering Groups, Panels and Advisory Groups

i) Planning Committee¹

Chair – See Section A above	Vice Chair – See Section A above	
Local Authority Members 8 ² :		
Cheshire East ³	1	1 Vacancy (to be filled by a Member from another Local Authority)
Derbyshire CC ²	1	J Wharmby
Derbyshire Dales DC	1	M Buckler
High Peak BC	1	I Huddleston
Staffordshire Moorlands DC/Staffordshire CC	1	A Hart
Metropolitan Districts/NE Derbyshire DC ²	3	K Richardson M Chaplin L Hartshorne
Secretary of State Members 7:	M Beer	
	P Brady	
	B Hanley	
	K Potter	
	V Priestley	
	K Smith	
	R Bennett	

Notes:

¹ Membership of the two Standing Committees has been prepared in accordance with the previous Authority decision that Committee sizes be fixed to 15 with half of the Authority Membership appointed to each Committee. According to the proportionality requirements in the Environment Act 1995 there should be 8 Local Authority Members on each Committee and 7 Members appointed by the Secretary of State (this includes Parish Members). Before appointing to Planning Committee, the Authority will be asked to confirm the allocation of Council Member places by appointing Authorities.

³There is currently 1 Local Authority Member vacancy. The Cheshire East Council place on the Planning Committee is available for another Local Authority Member as the Member appointed by Cheshire East asked not to be on Planning Committee and has confirmed this is to continue.

ii) Resources Committee¹

Chair – See section A above	Vice Chair – See section A above
Local Authority Members 8 ² :	Secretary of State Members 7/8 ³ :
C Greaves	Prof J Dugdale
A Nash	K Smith
C O’Leary	Dr R Swetnam
K Rustidge	S Thompson
C Farrell	Y Witter
1 Vacancy	A Gregory
1 Vacancy	1 Vacancy-DEFRA
1 Vacancy	1 Vacancy-DEFRA

Notes:

¹ Membership of the two Standing Committees has been prepared in accordance with the previous Authority decision that Committee sizes be fixed to 15 with half of the Authority Membership appointed to each Committee. According to the proportionality requirements in the Environment Act there should be 8 Local Authority Members on each committee and 7 Members appointed by the Secretary of State (This includes Parish Members).

For the previous 5 years the size of the Programmes and Resources Committee has been increased by 1 to 16 so that the Chair of the Authority can be appointed to both Committees. K Smith has asked that, if he is appointed as Chair of the Authority, this increase is continued for the new Resources Committee and the Panel are supportive of this. Agreement of this will increase the Secretary of State places available to 8.

²Following the request for expressions of interest 5 Local Authority Members have indicated that they would like to be appointed to the Resources Committee. There are 3 vacancies for Local Authority Members.

³ If the extra place for the Chair is agreed and that place is for K Smith there will be 2 vacancies for Secretary of State Members. These two vacancies will be holding vacancies pending the completion of the recruitment process to replace them by Members appointed by Defra.

iii) Local Joint Committee 9 members (5 Local Authority: 4 Secretary of State)¹ and 9 staff representatives

Local Authority Members 5:	Secretary of State Members 4:
I Huddleston	M Beer
K Richardson	K Potter
M Chaplin	V Priestley
J Wharmby	K Smith
1 Vacancy	

Note:

¹ Following a request for expressions of interest there is 1 Local Authority place available. This means that the Authority needs to identify 1 Local Authority Member to be appointed.

Please note that meetings of this Committee are scheduled to take place quarterly but only take place when there is sufficient business to make a meeting viable. To ensure a meeting goes ahead there also needs to be a quorum of 4 Members each from the Authority Members and the Staff representatives (8 in total).

iv) Appeals Panel 9 members (5 Council: 4 Secretary of State)¹

Local Authority Members 5:	Secretary of State Members 4:
I Huddleston	M Beer
A Nash	P Brady
M Chaplin	Dr R Swetnam
C Farrell	
J Wharmby	1 Vacancy

Note:

¹There is 1 Secretary of State Members vacancy to be filled.

The Panel is used as a pool of Members to be called upon in the event of an appeal. Members of the Investigatory and Disciplinary Committee cannot also be Members of the Appeals Panel.

v) Investigatory and Disciplinary Committee 6 members (3 Council + 3 Secretary of State)¹

Local Authority Members 3:	Secretary of State Members 3:
K Richardson	V Priestley
2 Vacancies	2 Vacancies

Note:

¹This year following the request for expressions of interest there are 2 vacancies for Secretary of State Members and 2 vacancies for Local Authority Members.

The Panel is used as a pool of Members to be called upon in the event of an appeal. Members of the Appeals Panel cannot also be Members of the Investigatory and Disciplinary Committee. The Chair of the Authority cannot be on this committee.

C) Other Appointments

i) Due Diligence Panel (1 Member and 1 Deputy)

1 Member: Prof Janet Dugdale	1 Deputy ¹ : Vacancy
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Note:

¹There is currently 1 vacancy.

ii) Governance Review Working Group (8 Members)¹

Local Authority Members (4) ² :	Secretary of State Members (4) ³ :
C Greaves	V Priestley
C O'Leary	B Hanley
K Richardson	P Brady
	Prof J Dugdale
1 Vacancy	K Smith
	M Beer
	S Thompson

Notes:

¹ This Working Group started meeting again in December 2023 and made a report to the May 2025 Authority meeting. The Group is continuing to meet.

²Following expressions of interest there is still 1 Local Authority place to be filled.

³There are 7 Secretary of State expressions of interest for 4 places so if all these Members are proposed and seconded a vote will be required.

iii) Local Plan Review Member Steering Group (9 Members) ¹

Chair & Vice Chair of Planning Committee	- See Section A
Authority Chair	- See Section A
M Beer	
P Brady	
B Hanley	
A Nash	
K Potter	
V Priestley	
K Smith	
M Buckler	
1 Vacancy	

Note:

There is currently one vacancy.

iv) Member Appointments Process Panel (4 Members & 2 Reserves) ¹

Local Authority Members (2 & 1 Reserve):	Secretary of State Members (2 & 1 Reserve):
K Richardson	Dr R Swetnam
K Rustidge	Y Witter
1 Vacancy	1 Vacancy

Note:

There is currently 1 Local Authority vacancy and 1 Secretary of State Vacancy.

D) Appointment to Outside Bodies ¹

National/Regional Bodies:	
Campaign for National Parks	1 Member and 2 Deputies: M Buckler 2 Vacancies
East Midland Councils	1 Member and 1 Deputy: Prof Janet Dugdale B Hanley
Europarc	1 Member: A Nash
Derbyshire Archaeological Advisory Committee	1 Member: K Smith

South Yorkshire Mayoral Combined Authority	1 Member and 1 Deputy: 2 Vacancies
Charity Trustees, Company Directorships, LLPs:	
Peak District National Park Foundation	3 Members and 2 Reserves: Prof Janet Dugdale K Rustidge K Potter Dr R Swetnam 1 Vacancy
National Parks England	Chair of Authority
National Parks Partnerships LLP – Annual Meeting	Chair of Authority
Partnerships:	
Derwent Valley Community Rail Partnership	1 Member and 1 Deputy: 2 Vacancies
High Peak and Hope Valley Community Rail Partnership	1 Member and 1 Deputy: M Beer B Hanley
Moors for the Future Partnership Group	1 Chair, 1 Deputy Chair and 1 Reserve: V Priestley 2 Vacancies
Peak District Partnership ⁴	1 Member and 1 Deputy P Brady K Rustidge A Nash - Deputy
Staffordshire Destination Management Partnership	1 Member and 1 Deputy: 2 Vacancies
Other Meetings, Groups and Forums:	
Derbyshire Local Nature Recovery Strategy Board ² and Staffordshire Local Nature Recovery Strategy Steering Group ²	1 Member (was Member Champion for Natural Environment, Biodiversity and Farming): Prof J Dugdale
Land Managers Forum	1 Chair, 1 Deputy Chair and 2 Members: 4 Vacancies
Peak District Local Access Forum	1 Member and 1 Deputy: M Beer A Nash-Deputy
Peak District Local Nature Partnership	1 Member and 1 Deputy: M Buckler 1 Vacancy

Stanage Forum Steering Group	1 Member and 1 Deputy: B Hanley V Priestley
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Notes:

¹Where there is one candidate for each role and no further nominations are received the appointment can be made by a show of hands. Where more candidates are proposed for one role a vote by show of hands or by ballot may be required.

²Local Nature Strategy Boards/Groups - it may be necessary for this Member to also be appointed to other LNS Groups as they emerge.

⁴The Peak District Partnership only meets when required.

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MEMBERS ANNUAL ATTENDANCE REPORT

1. Purpose

To consider the annual return of Members' attendance at Authority, Committee meetings and essential Member training events for 2024/25.

2. Key Issues

2.1 As DEFRA and other appointing Authorities regularly request information on the attendance level of their appointed members, the Authority publishes attendance figures annually based on the financial year, in this instance 1st April 2024 to 31st March 2025.

3. Proposals

3.1 The annual return is provided for information and for Members to note.

4. Recommendation:

1. To note the annual return of the Members' attendance for 2024/25 at meetings of the Authority, Standing Committees and Essential Member Training as set out in Appendix 1 to the report.

How does this contribute to our policies and legal obligations?

- 5.** The Authority meeting on 24th June 2005 (Min.62/05) agreed a set of performance measures for Members. The Measure for meetings is the percentage of full Authority meetings and approved duties actually attended, that Members could have attended. The target is at least 75% overall and 75% of each specific meeting. The purpose of this report is to monitor attendance and commitment.
- 6.** The Governance Review Working Group reviewed these arrangements and concluded that the existing reporting arrangements worked well and should continue. The Authority approved the recommendation of the Working Group, in May 2020, for an annual report on Member attendance at meetings of the Authority, Standing Committees and essential learning and development events only.

Background Information

- 7.** The annual return shown in Appendix 1 (attached to the report) has been compiled from the attendance records at full Authority, Standing Committee meetings and essential learning and development events for the period April 2024 to March 2025. The Authority has previously agreed that the use of individual percentages would not be published so the information is presented to provide a comparison between possible meetings attended and the actual number of meetings attended.
- 8.** Overall for 2024/25 attendance at meetings was 72% This is less than the 75% target.
- 9.** This year's total is less than the 76% 2023/24 figures. However, it is noted that the ability of some Members to attend these meetings due to their individual medical issues has had an impact on the individual attendance figures.
- 10.** During 2024/25, the Local Joint Committee didn't meet at all so a percentage has not been included for this in Appendix 1.

11. In the year 2024/25 there were two additional special meetings called. It is recognized that the statutory notice was given for these meetings however appreciated that it is not always possible for Members to re-arrange their calendars to accommodate these additional meetings. Therefore, in Appendix 1 to this report the additional meetings have been separated out so that these meetings can be identified.

Essential Member training

12. The current Member Learning and Development Framework states that attendance at training and other events will be monitored and reported. The target for overall attendance at events identified as “essential” in the Member Learning and Development Plan is 50%.

In this period 5 Essential Member Training sessions were held, however attendance was only expected at 4 of these as 2 were sessions of planning training and attendance was only required by those Members on Planning Committee, but other Members could attend if they so wished. Overall for 2024/25 the attendance at these events was 59%.

Committee attendance by the Chair and Deputy Chair of Authority and the Chairs and Vice Chairs of Standing Committees as Observers

Standing Order 1.45(1) allows the Chair and Deputy Chair of Authority and the Chairs and Vice Chairs of Standing Committees to attend meetings as observers of a committee they are not appointed to where they are able to speak but not vote. In the absence of the Chair of a Standing Committee, the Vice Chair may attend instead. In the relevant time-period, there were no instances where a Chair or Vice Chair attended.

Attendance as a participating Committee Member is set out in Appendix 1. Since July 2018 the Chair of the Authority has been a Member of both Standing Committees.

13. Corporate Implications

- a. Legal
No adverse implications arising from this report.
- b. Financial
No issues
- c. National Park Management Plan and Authority Plan
No adverse implications arising from this report.
- d. Risk Management
There are no apparent risks.
- e. Net Zero
No adverse implications arising from this report.

14. Background papers (not previously published)

None

15. Appendices

Appendix 1 – Members’ Attendance Record 2024/25

Report Author, Job Title and Publication Date

Sarah Adams, Senior Adviser Business Centre, 11th July 2025

Responsible Officer, Job Title

Angela Edwards, Authority Solicitor & Monitoring Officer

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Members' Attendance Record: April 2024 - March 2025

	National Park Authority		Planning Committee		Programmes and Resources		Essential Training			
Member	Scheduled	Attended	Scheduled	Attended	Scheduled	Attended	Scheduled	Attended	Total Scheduled	Total attended
Beer, Martin	8 + 2 Special	7 + 2 Special	11	10	0	0	4	4	25	23
Bennett, Rachel	8 + 2 Special	7 + 2 Special	11	11	0	0	4	2	25	22
Berresford, James	8 + 2 Special	7 + 1 Special	0	0	4	3	4	3	18	14
Brady, Patrick	8 + 2 Special	6 + 2 Special	11	10	0	0	4	4	25	22
Buckler, Matt	8 + 2 Special	5 + 2 Special	11	8	0	0	4	2	25	17
Chaplin, Mike	8 + 2 Special	7 + 2 Special	11	11	0	0	4	3	25	23
Dugdale, Janet	8 + 2 Special	8 + 1 Special	0	0	4	3	4	2	18	14
Farrell, Charlotte	8 + 2 Special	4 + 1 Special	0	0	4	2	4	3	18	10
Fryer Paul	1 + 0 Special	0 + 0 Special	0	0	1	1	0	0	2	1
Gourlay, Nigel	1 + 0 Special	0 + 0 Special	0	0	1	0	0	0	2	0
Greaves, Charles	8 + 2 Special	6 + 1 Special	0	0	4	4	4	4	18	15
Gregory, Andrew	8 + 2 Special	5 + 1 Special	0	0	4	2	4	1	18	9
Grooby, Linda	7 + 1 Special	5 + 1 Special	0	0	3	0	4	3	15	9
Hanley, Bill	8 + 2 Special	6 + 2 Special	11	9	0	0	4	2	25	19
Harling, Annabelle*	1 + 1 Special	0 + 0 Special	1	0	1	0	1	0	5	0
Hart, Andrew*	8 + 2 Special	2 + 2 Special	11	5	0	0	4	0	25	9
Hartshorne, Lee	8 + 2 Special	5 + 2 Special	11	8	0	0	4	3	25	18
Heath, Gill	8 + 2 Special	5 + 0 Special	0	0	4	2	4	0	18	7
Huddleston, Ian	8 + 2 Special	6 + 1 Special	11	8	0	0	4	4	25	19

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	National Park Authority		Planning Committee		Programmes and Resources		Essential Training			
Member	Scheduled	Attended	Scheduled	Attended	Scheduled	Attended	Scheduled	Attended	Total Scheduled	Total attended
Murphy, Dermot	8 + 2 Special	6 + 2 Special	11	7	0	0	4	1	25	16
Nash Andy	8 + 2 Special	6 + 2 Special	0	0	4	3	4	3	18	14
O’Leary, Chris	8 + 2 Special	6 + 0 Special	0	0	4	4	4	0	18	10
Potter, Kath	8 + 2 Special	8 + 2 Special	11	9	0	0	4	4	25	23
Priestley, Virginia	8 + 2 Special	7 + 2 Special	11	10	0	0	4	3	25	22
Richardson, Ken	8 + 2 Special	7 + 2 Special	11	8	0	0	4	2	25	19
Rustidge, Ken	7 + 1 Special	7 + 1 Special	0	0	3	3	3	3	14	14
Smith, Ken	8 + 2 Special	8 + 2 Special	11	10	4	4	4	3	29	27
Swetnam, Ruth	8 + 2 Special	8 + 0 Special	0	0	4	4	4	3	18	15
Thompson, Simon	8 + 2 Special	8 + 0 Special	0	0	4	3	4	4	18	15
Wharmby, Jean	8 + 2 Special	2 + 2 Special	11	5	0	0	4	1	25	10
Witter, Yvonne	8 + 2 Special	7 + 1 Special	0	0	4	3	4	1	18	12
Woods, Becki	8 + 2 Special	4 + 1 Special	0	0	4	2	4	0	18	7
Total	290	215	166	129	61	43	116	68	633	455
Total attendance per committee as %		74%		78%		70%		59%		
		Target 75%		Target 75%		Target 75%		Target 50%		

Total overall attendance including training		Total overall attendance just at committees	
2024/25	72%	2024/25	75%
2023/24	76%	2023/24	76%
2022/23	74%	2022/23	80%
Target 75%			

*Attendance affected due to medical reasons.

ANNUAL CALENDAR OF MEETINGS 2026

1. Purpose

To approve a calendar of meetings up to December 2026 and to note the proposed dates for the business planning briefings, compulsory planning training and the Member Workshops identified as essential in the Member Learning and Development Plan.

2. Key Issues

2.1 At the Annual Meeting each year, the Authority approves the schedule of meetings for the following calendar year. This means that Members and Officers have 18 months of meetings in their diaries and can plan accordingly.

2.2 The dates in the proposed calendar of meetings are set around necessary deadlines for finance, audit and performance reporting and take into account other factors such as school holidays and Bank Holidays.

3. Proposals

3.1 Members are asked to:

- Approve the calendar of meetings for 2026 as set out in Appendix 1.
- Note the proposed date for the compulsory Planning Training for 2026 and to set aside in diaries one of the dates to guarantee attendance. The proposed dates are 18th September 2026 and 16th October 2026.
- Note the proposed dates for the Member Workshops and Business Planning Briefings.

4. Recommendation

- 1. To approve the Calendar of Meetings for 2026 as set out in Appendix 1 of the report.**

5. Corporate Implications

a. Legal

b. Financial

There are no additional resource implications arising out of the report. As there are time and resource implications for setting up additional meetings the schedule has been set to reflect the known business needs of the organisation rather than a set four to eight weekly cycle of meetings.

c. National Park Management Plan and Authority Plan

d. Risk Management

There are no risks arising out of the report. Subject to legal requirement about providing adequate notice measures are in place to call additional meetings if it becomes apparent that one is needed and to cancel a meeting if there is insufficient business.

e. Net Zero

6. Background papers (not previously published)

None

7. Appendices

Appendix 1 – Proposed Calendar of Meetings for 2026

Report Author, Job Title and Publication Date

Sarah Adams, Senior Adviser Business Centre, 11 July 2025

Responsible Officer, Job Title

Emily Fox, Head of Resources

DRAFT PROGRAMME OF MEETINGS 2025-2026

Bank Holidays 2026: 1 January, 3 April, 6 April, 4 May, 25 May, 31 August, 25 December, 28 December 2026

Appendix 1

All Meetings/Events start at 10am except where shown

	2025					2026											
Formal Committee Meetings	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
Authority		26		28			27	27		22		10 (AGM)		25		27	
Resources			31			23			24		5				30		
Planning	8	5	10	7	5	16	13	13	10	15	12	17	7	4	9	6	4
Planning Site Visits	7	4	9	6	4	15	12	12	9	14	11	16	6	3	8	5	3
Training, Other Events & Meetings	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
Members' Forum (in person 1.30pm)		26		28			27	27		22		10		25		27	
Business Planning Briefings			10	21											2	13	
Training Events (Times to be notified)		19 Planning Training (1)	17 Planning Training (2) 24 Climate Change Training		12 National Planning Policy Framework & Article 4 Training					29 Natural / cultural capital, public goods, ecosystem services & funding opportunities Training	5 New Member Induction 19 Annual Tour 26 Equality Training			18 Planning Training (1)	16 Planning Training (2)		

Other Committees, Steering Groups and Panels	Meeting Frequency
Local Joint Committee	Quarterly, provisional dates set: 2025: 3 October and 21 November 2026: 27 February, 15 May, 16 October, 20 November
Appeals Panel	Meets only when required
Due Diligence Panel	Quarterly, provisional dates set: 2025: 17 July and 16 October 2026: 4 February, 17 April, 17 July, 16 October
Governance Review Working Group	Meetings arranged as required
Local Plan Review Member Steering Group	Meetings arranged as required
Member Appointments Process Panel	Usually meets once per year in June

CHIEF EXECUTIVE REPORT (PM)

1. Purpose

To up-date Members of key items since the previous Authority meeting.

2. Context

2.1 National issues

2.1.1 Ministerial support for Protected Landscapes and future funding

We have received a letter of support for our work from Mary Creagh, Minister for Nature and National Parks. Such a letter has been sent to all English National Park. The letter states, “this government will empower Protected Landscapes to become greener, wilder and more accessible.... Protected Landscapes are fundamental to strengthening the nation's economic health by looking after the natural resources we depend on. Through nature's recovery, Protected Landscapes protect communities from flooding, fight climate change, enable sustainable food production and create green jobs. They also have a vital role in connecting diverse communities with nature - underpinning the nation's mental and physical health and reducing the strain on our NHS.... In recognising their importance to the nation, this government has committed to reinvigorating Protected Landscapes with new legislation, resources and tools.”

This letter is very welcome, although it is as yet unclear as to what extent such stated support will translate into a positive funding settlement within Defra. There is no further news on our settlement for next year with the Defra allocation in the spending review representing a departmental cut, possibly not as large as some had speculated.

The government are clearly looking at alternative ways to fund or bring resources into protected landscapes, which may not bode well for our future core grant, with a call for evidence on alternative levers and funding mechanisms for protected landscapes. We will be responding to this call-in due course both as the Peak District National Park and National Parks England. One aspect that is being asked about is the potential for a ‘beneficiary pays’ principle, which may open the way for some sort of visitor charging. The question of whether visitors should be charged for going to a National Park has been picked up in the national and local media based upon a point I made in an interview. The point was that a very small charge per visitor would more than compensate for cuts in our government grant. I was not advocating for such a charge, rather making the point that the current government funding model for English National Parks is neither sufficient nor sustainable and therefore we need to have a debate about how National Parks are to be funded in the future, if we want to retain the service and quality necessary to deliver the multiple benefits we provide.

2.1.2 Secretary of State Member appointment update and new local Members

The Peak District National Park received the highest number of applications in the recent Secretary of State recruitment process, almost 80. The Chair has been involved in longlisting, shortlisting and interviewing potential candidates. Our recommendations are now with the Minister for approval, which we expect to take several months. At the same time, we are currently ‘on-boarding’ four new Members following local elections in Derbyshire and Staffordshire.

2.1.3 National engagement

By the time of the Authority meeting I will have attended a national gathering for senior leaders in our biggest national environmental organisations and English National Park CEOs. This follows a similar meeting last year and is aimed at building relationships and understanding. The focus this year is on identifying the challenges ahead and shaping our collective endeavor.

1.1 Regional issues

1.1.1 MP meetings

There have not been many MP meetings since the last update. MP engagement has focused on parking issues in Monyash and Edale villages.

1.1.2 EMCCA Biodiversity and Nature Taskforce

One meeting of the Taskforce has taken place since the last Authority report, however, I was unable to attend as I was at a National Parks England event in Dartmoor. The regional Mayor attended the Taskforce, which indicates a positive level of engagement. As a Taskforce member I took part in an online workshop on green finances.

1.1.3 Tourism

Following the Authority signing off our Tourism Charter at the last meeting, work has been progressing in explaining the Charter to partners and setting up a workshop for October to develop an action plan. Key partners will be asked to sign the Charter before the workshop and wider partners and stakeholders will be given the chance to sign up to the Charter and action plan following the workshop. I have given input into the EMCCA Destination Management Plan, we are awaiting the first draft of this.

1.1.4 NPMP Partnership Group

Our Management Plan Partnership Group recently held its annual meeting. There was an excellent level of engagement and high-level support from the vast majority of key partner organisations. Some organisations sent representatives along for the first time and other organisations have had a change of personnel so part of the meeting involved taking everyone through the Management Plan. Good discussions took place on issues covering climate change and visitor pressure. There was particular interest in our visitor data and use of AI in mapping. Agreements to share more information across organisations were made. The Tourism Charter was presented to the group and broadly supported.

1.1.5 Youth Impact Collective

The Youth Impact Collective attended the Future Countryside Conference held at Chatsworth. Two of our Collective members were on a panel with younger people from other National Parks and farming organisations. Our representatives were very impressive and showed how worthwhile the work has been in helping this group of younger people develop, find their voice and represent their interests and views.

1.1.6 Police engagement

A decision has been jointly made with the Derbyshire Police and Crime Commissioner (PCC) to merge our Peak Summit meeting (led by myself and the Derbyshire PCC) with the Derbyshire Rural Crime Partnership meeting. Many of the invitees crossed over and the agendas for both groups were similar. There is still a commitment to working with neighboring police forces.

1.1.7 CEO engagement

A CEO Roadshow has taken place in Dunford Bridge. This is a very small community on the northern edge of the National Park. A positive conversation took place with local farmers who attended. Whilst numbers were not high, it is important to visit all parts of the National Park and give everyone the opportunity of attending if they can.

I also attended the Tissington Well Dressing celebration, the launch of Derbyshire Wildlife Trust's new strategy and a Monyash residents meeting focused on issues of parking and motorcycles in the centre of the village.

1.2 Internal issues

1.2.1 Organisational change

The recent organisational change programme is now complete with departing staff having left the organisation, apart from where tactical contract extensions have been offered. New roles have now been recruited to. The intention is to now pause further organisational change until we know the outcome of our three-year funding settlement, expected in the autumn.

1.2.2 Investors In People (IIP) assessment

We now have the outcome of our recent three-yearly re-assessment for our IIP award. We have been given a Gold award. This is a significant achievement, with only 17% of organisations holding such an award. We were also given a Silver wellbeing award. Both awards represent hard work and continual improvement over the last nine years. An action plan will now be put together following a detailed review of the assessor's comments and recommendations.

1.2.3 Resources

We ended last financial year having made the required surplus we had planned in our budget plus a small additional surplus that we have put into reserves to help prepare for expected future cuts in our core grant. We are progressing with our plans to spend the additional Defra capital in this year. This money can only be spent on capital and has to be spent or returned at the end of the year. There are regular meetings monitoring progress on our spending plans. We have also submitted our Landscape Connections National Lottery Heritage Fund (NLHF) bid, which would be worth £10m over ten years if successful. Another NLHF bid for £5m for the North Lees estate is also being developed.

3. Proposals

None

4. Recommendations

1. For Members to note the report

5. Corporate Implications

- a. Legal - none
- b. Financial – the report notes some concerns over our future funding position and reports progress on some current additional income generation.
- c. National Park Management Plan and Authority Plan – the report covers some of the work that is helping deliver the NPMP.
- d. Risk Management – a number of financial risks are noted in the report.
- e. Net Zero – no major net zero implications from the report.

6. Background papers (not previously published)

None

7. Appendices

None

Report Author, Job Title and Publication Date

Phil Mulligan, CEO, Publication Date

Responsible Officer, Job Title
Phil Mulligan, CEO

PEAK DISTRICT NATIONAL PARK FOUNDATION ANNUAL REPORT 2024/25

1. Purpose

To provide Members with the annual financial and operational report on the Peak District National Park Foundation (the Foundation) for 2024-25. To seek Member approval to enable the Authority to accept funds of any value per annum from the Foundation.

2. Context

2.1 The Foundation was established by the Authority to help generate sustainable income, and was registered as a separate entity with the Charity Commission in February 2019. The current Memorandum of Understanding and Grant Agreement between the Authority and Foundation began on 17 May 2023 and are for five years.

2.2 The Memorandum of Understanding requires an annual report and accounts from the Foundation to be provided to Members. The Grant Agreement states that the Foundation shall provide the Authority with an annual financial and operational report that outlines the following.

1. Financial – the use of the grant provided by the Authority to the Foundation.
2. Financial – the additional funding the Foundation has secured from third parties, including the amounts and sources, and how the funding has been used.
3. Operational – what the Foundation has delivered.

The remainder of this report sets this information out for the financial year 2024-25. It then outlines what the Foundation is seeking to fundraise for in 2025-26.

3. Proposals

1. Financial – the use of the grant provided from the Authority to the Foundation

3.1 The table below outlines the overall financial position of the Foundation in 2024-25.

Grant provided by Authority	£136,613
Operating costs of the Foundation	£113,578
Funds raised by the Foundation	£617,487
Grants provided by the Foundation to the Authority	£518,067
Grants provided by the Foundation to others (community groups, parish councils, schools)	£21,185

3.2 At the end of 2024-25, the Foundation held the following funds in reserve.

- Unrestricted reserves: £120,392. This includes 4 months operating costs for the Foundation, as well as unspent unrestricted income from 2024/2025.
- Restricted reserve: £127,292. This is funds from restricted grants to be spent in future years. Please note that this includes an underspend of £96,637 from the Authority's grant due to Foundation staff vacancies in 2023-2025. A proposal for how this will be spent will be taken to the Authority's RMM in Summer 2025.
- Designated reserve: £112,500. This is for projects the Foundation committed to funding in 2025-2026.

2. Financial – the additional funding the Foundation has secured from third parties, including the amounts and sources, and how the funding has been used

3.3 In 2024-25 the Foundation raised £617,487 from third parties. The major sources of funding were as follows.

- Grants: £25,000 including £22,500 from The National Archives representing the first half of the funding for the Landscapes Unlocked project (see paragraph 3.8).
- Corporate Partnerships & Donations: £111,851 including £28,000 from SC Johnson for the Featherbed Moss research project (see paragraph 3.6) and £40,000 from GiffGaff towards the Protect our Peatlands Appeal (see paragraph 3.6).
- Donations from Individuals: £420,736 including £374,500 received from the anonymous donor funding the Visitor Centres project (see paragraph 3.6).
- Royalties: £38,879 generated through the Foundation's partnership with Cafedirect.
- Gift Aid: £21,021 of Gift Aid claimed on donations across the year.

3.4 These funds were used in the following three ways.

- The majority were used to make grant payments to the Authority and other organisations, which totalled £539,252 in 2024-25, as detailed in paragraphs 3.6 and 3.7.
- Some have been designated for use in delivering future projects, including those detailed in paragraph 3.8.
- The remainder, a relatively small amount, forms part of the Foundation's unrestricted reserve. This is used for the following two purposes.
 1. To be held back to cover winding-down costs for the charity.
 2. To enable future, as yet unidentified, projects.

3. Operational – what the Foundation has delivered

3.5 The following activity was delivered by the Foundation in 2024-2025.

- Developing the model of how the Foundation and Authority will work together, including identifying and approving projects.
- Developing a strong governance and management framework for the Foundation, ensuring it is compliant with the Code of Fundraising Practice and Charity Commission guidelines.
- Working with Authority staff to identify fundable projects or areas of work (ambitious outcomes for nature/people, value for money).
- Stewarding existing donor/supporter base, ensuring they feel valued.
- Increasing the donor/supporter base through funding applications, corporate partnership pitches, meetings with possible individual donors and appeals.
- Raising the profile of the Foundation in the National Park, Sheffield and Manchester.

3.6 The following grants were made to the Authority in 2024-2025.

- Visitor centres – grants totalling £374,500. Creating a sustainable visitor centre function for the Peak District National Park Authority. Additional grant of £137,000

secured and granted to fund foundational infrastructure, including Business Change Manager, website updates and an online booking system for cycle hire.

- Protect our Peatlands Appeal – grant of £46,675. Flood prevention research in Castleton and planting sphagnum moss on the Kinder plateau.
- Cressbrook Mill Bridge – grant of £28,547. Build and installation of a replacement bridge over the River Wye at Cressbrook Mill Bridge, reopening the route for residents, walkers and climbers.
- Featherbed Moss research project – grant of £28,000. Creation of a field laboratory alongside the Pennine Way on Featherbed Moss to examine the impact of planting density on moorland restoration.
- Biodiversity Net Gain assessment – grant of £11,600. An assessment of the potential of Biodiversity Net Gain on Authority owned land.
- Adapt-Eco – grant of £10,000. Developing the use of AI and Deep Learning to create highly detailed habitat maps, natural capital maps and species modelling maps of Warslow Moors and the North Lees estate.
- Protecting North Lees and Stanage – grant of £8,745. Supporting the ongoing costs of protecting and enhancing this much-loved area, including the restoration and upkeep of hedges and other nature corridors, control of invasive species, maintenance of ponds for wildlife and the improvement of public paths, stiles and access gates.
- Accessible outdoor classroom at Brunts Barn - grant of £5,500. The creation of an accessible outdoor classroom at Brunts Barn, Grindleford, to support young people with disabilities into conservation volunteering.
- Footpath improvements – grants of £3000. This includes Improvements of a section of the Dane Valley Way footpath and on the Long Causeway footpath.
- Support for Peak Park Conservation Volunteers (PPCV) – grant of £1,500. General grant to support the activities of PPCV.

3.7 The following grants were made to other organisations in 2024-2025. These were provided following consultation with relevant teams at the Authority, and they respond to gaps in provision and/or funding.

- Community Nature Fund – grants totalling £10,960. Beneficiaries: The Visionaries Collective in Bamford, Rowland Parish Council, Cavendish Village Hall.
- Connect Fund – grants totalling £10,225. 27 grants provided to remove barriers for disadvantaged and marginalised communities to access, understand and enjoy the National Park, including schools, community groups and associations.

4. Foundation plans for 2025-26

3.8 The Foundation has the following plans for projects in 2025-26.

- People of the Peak: Past, Present, Future. The Foundation has been successful in securing £198,500 from the National Lottery Heritage Fund to deliver the Development Phase of this project (July 2025 – February 2027). The Foundation has also contributed £7500 match funding to the project.
- Landscapes Unlocked. The Foundation has been successful in securing £45,000 from The National Archives to catalogue and digitise the extensive image collection of the Authority and open it up to the public (activity delivered October

25-September 26). The Foundation has also contributed £10,000 match funding to the project.

- Landscape Trees. We will launch a new programme to increase the planting of stand-alone trees and small copses into the farmed landscape of the White Peak. £21,000 has been raised through crowd funding (The Big Give), and the Foundation will contribute £30,000 match funding to the project.
- Moorland restoration. This continues to be an attractive area for investment, particularly amongst regional businesses. We will launch a new partnership with Ecologi (UK carbon offsetting company) to channel funds into moorland restoration in the National Park.
- Public grants. We will continue to offer our two popular public grants. The Connect Fund will distribute £10,000 annually in grants of up to £500 to help schools and community groups remove barriers they may face with visiting the National Park. The Community Nature Fund will distribute £30,000 annually grants of up to £5000 to parish councils and community groups to improve spaces for nature in the Peak District.
- Peak Park Conservation Volunteers (PPCV). We have committed £15,000 to contribute to a post help PPCV expand their activities.
- Engagement. We will be fundraising to enable a nature education project for schools/children in urban areas with high levels of deprivation and low access to green space. We will also be fundraising for a community programme for adults living in towns and cities close to the south of the National Park.
- Visitor centre project. We will continue to work closely with the donor to ensure that they feel involved in the project and to ensure the project is a success over the remainder of the grant period.

5. Grant value from the Foundation to the Authority

3.9 When approval was provided at the February 2023 Authority meeting for delegating entering into the emerging Memorandum of Understanding and Grant Agreement with the Foundation, a further recommendation in the report stated that the maximum grant the Authority can accept from the Foundation per annum is £200,000 (Minute reference 13/23).

3.10 The total value of grants that the Authority receives from the Foundation has increased. It is now likely that the total grant value that the Foundation will provide to the Authority in the current financial year will breach the £200,000 maximum. Therefore, approval is sought to remove the maximum grant the Authority can receive from the Foundation. This will ensure we are able to accept the maximum amount of grants from the Foundation in the most efficient and timely way, as it would negate requesting Members to approve any grants that would take the value over £200,000 per annum.

4. Recommendations

- 1. To note the annual financial and operational report on the Peak District National Park Foundation for 2024-25 and the Foundation's plans for 2025-26.**
- 2. To authorise applications for and acceptance of grants from the Peak District National Park Foundation, subject to approval of the relevant Head of Service and compliance with Standing Orders in all respects, except for Standing**

Order 7.C-2 (or any subsequent equivalent reference) in respect of each individual grant.

- 3. To delegate authority to the Authority Solicitor to enter into and determine the terms and conditions of any Grant Agreements arising from recommendation 2 in the best interests of the Authority.**

5. Corporate Implications

a. Legal

The Authority has a long-term ambition and need to diversify and increase income. As a statutory body, the Authority is restricted in some forms of fundraising and there is some limitation in attracting charitable donations. Hence the Authority took the decision in 2018 to establish a charity to harness fundraising opportunities and create a special purpose vehicle for fundraising. There is some natural overlap in the statutory purposes of the Authority and the charitable objectives of the Peak District National Park Foundation. However, it must always be noted that both are entirely separate legal entities that must operate independently in their own respective best interests.

b. Financial

The Authority provided the Foundation with £3,863 as an in-kind contribution and £136,500 as a direct grant in 2024-25.

c. National Park Management Plan and Authority Plan

The Foundation projects contribute to delivering the National Park Management Plan aims. In the grants that the Foundation provides to the Authority, it can help to deliver to the financial resilience of the Authority – Authority Plan objective D.

d. Risk Management

The key corporate risk of this proposal is to lift the maximum annual grant that the Authority can accept from the Foundation. However, this is mitigated through the controls within Standing Orders to ensure financial viability and protect against any reputational harm to the Authority.

e. Net Zero

Some of the Foundation projects will contribute to delivering net zero for the place.

6. Background papers (not previously published)

None.

7. Appendices

None.

Report Author, Job Title and Publication Date

Phill Mulligan, Chief Executive, Publication Date

Responsible Officer, Job Title

Phill Mulligan, Chief Executive

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INCORPORATING PROTECTED LANDSCAPES TARGETS AND OUTCOMES FRAMEWORK TARGETS INTO THE PEAK DISTRICT NATIONAL PARK MANAGEMENT PLAN 2023-2028

1. Purpose

- 1.1 For Members to approve the incorporation of the Protected Landscapes Targets and Outcomes Framework (PLTOF) targets into the 2023 -2028 Peak District National Park Management Plan. The incorporation meets the Defra requirement that National Park Authorities and National Landscape Partnerships and Conservation Boards (Protected Landscape bodies) should incorporate the targets into their statutory Management Plans.

2. Context

- 2.1 The [Environmental Improvement Plan 2023](#) sets out the Environment Act Targets and wider environmental goals and delivery pathways for England. The [Levelling Up and Regeneration Act 2023](#), strengthened the duty on relevant authorities to ‘seek to further’ purposes of Protected Landscapes, and gave the government power to create secondary legislation on Management Plans and commitment to do this.
- 2.2 The requirement to incorporate the PLTOF targets in the [Defra policy paper on the PLTOF in January 2024](#), means Management Plans will be more closely linked to the Environment Act targets as well as delivering on the Protected Landscapes purposes. The importance placed on the PLTOF targets, and role of the Management Plan as a focal point for partnership working, was emphasised in a recent letter to the Peak District Chief Executive from the Defra Parliamentary Under Secretary of State for Nature [Letter from Under Secretary](#).
- 2.3 Members have been provided with several updates on the PLTOF targets, most recently at the May 2025 Members Forum. Members were made aware of the current progress on setting the targets, including the further development of work with partners and the setting of the PLTOF targets for the Peak District.

3. Proposals

- 3.1 The table at Appendix 1 outlines the PLTOF targets for the Peak District National Park. To comply with Defra requirements, Members are asked to approve the table of targets being incorporated into the Peak District National Park Management Plan 2023-28. For clarification, these do not replace the existing targets in the Management Plan, as the PLTOF targets will sit alongside the existing performance monitoring mechanisms.
- 3.2 Appendix 1 demonstrates that there are still some target indicators where there is no baseline data available. Therefore, at the moment, there are no targets set for the Peak District. To ensure we can progress in a timely manner when data and further information becomes available, it is requested that authority is delegated to the Head of Resources to update targets as required. We will continue to update Members at appropriate times as this work progresses.

4. Recommendations

- 1. To approve the targets, as set out in appendix 1, being incorporated into the Peak District National Park Management Plan 2023-28.**
- 2. To delegate authority to the Head of Resources to amend and update Protected Landscapes Targets and Outcomes Framework targets as further baseline and partner data becomes available.**

5. Corporate Implications

a. Legal

Pursuant to sections 5 and 11A of the National Parks and Access to the Countryside Act 1949, the Authority must deliver to the statutory purposes and statutory duty, respectively, when carrying out its work. Monitoring progress against the aims and objectives set out in the National Park Management Plan will enable appropriate scrutiny and safeguard legal compliance.

The National Park Management Plan is compliant with the Authority's duties in relation to equality, diversity and inclusion. Specific projects undertaken in pursuance of delivery of the aims and objectives will individually identify and address any adverse equality impacts on a case by case basis for consideration prior to approval.

b. Financial

There are no financial implications associated with the proposals outlined in this report. All expenditure associated with the National Park Management Plan is allocated through setting the 2025-26 budget and specific approvals outside of this report.

c. National Park Management Plan and Authority Plan

The proposals will ensure that the National Park Management Plan is compliant with the Defra requirement that National Park Authorities incorporate the PLTOF targets into their statutory Management Plans.

d. Risk Management

The greatest risk of incorporating the PLTOF targets into the National Park Management Plan is being unable to meet the targets. This risk has been mitigated by working with partners to set prudent targets that are based on delivery plans.

e. Net Zero

This report doesn't directly contribute to meeting net zero. However, Climate Change is one of the four aims of the National Park Management Plan, so delivering the Plan would contribute to meeting net zero for the place.

6. Background papers (not previously published)

Parliamentary Under Secretary of State for Nature letter to Chief Executive.

[Letter from Parliamentary Under Secretary of State for Nature.pdf](#)

7. Appendices

Protected Landscapes Targets and Outcomes Framework (PLTOF) targets for the Peak District.

Report Author, Job Title and Publication Date

Simon Geikie, Strategy and Performance Manager, July 2025

Responsible Officer, Job Title and Publication Date

Emily Fox, Head of Resources, July 2025

National Park Management Plan Aim	Environmental Improvement Plan Outcome	Target Indicator	Data Provider	Baseline Data Release Date	Peak District Stats	Year to Achieve Target	Apportionment or (Locally Set Target)
Aim 2	Goal 1 Thriving plants and wildlife	TI_1 Extent of wildlife rich habitat created or restored within Protected Landscapes, outside of protected sites	Natural England	July 2025	Pro-rata target Total restore / create: 11,356.40 ha Equivalent to 567.82 ha per year between 2022 and 2042	2042	3000ha
Aim 2	Goal 1 Thriving plants and wildlife	TI_2 Percentage of SSSIs within Protected Landscapes in favourable condition	Natural England	9 th May 2025	Total SSSI features: 445 Features in favourable condition: 111 (24.9%) Target requires: 356 (80%)	2042	(TBA)
Page 59 Aim 2	Goal 1 Thriving plants and wildlife	TI_3 Percentage of SSSIs within Protected Landscapes assessed as having 'actions on track' to achieve favourable condition	Natural England	9 th May 2025	Total SSSI features: 445 Features with 'actions on track': 29 Target requires: 267 (60%)	2028	(TBA)
Aim 2	Goal 1 Thriving plants and wildlife	TI_4 Extent of priority habitat within Protected Landscapes, outside of protected sites, in favourable management through agri-environment schemes	Defra	Unknown		2042	(TBA)
Aim 2	Goal 1 Thriving plants and wildlife	TI_5 Percentage of land managers adopting nature-friendly farming on_ a percentage of their land	Defra	Unknown		2030	(TBA)

National Park Management Plan Aim	Environmental Improvement Plan Outcome	Target Indicator	Data Provider	Baseline Data Release Date	Peak District Stats	Year to Achieve Target	Apportionment or (Locally Set Target)
Aim 1	Goal 1 Thriving plants and wildlife	TI_6 Level of greenhouse gas emissions within Protected Landscapes	DESNZ	June 2024	Standard stats reported in the current NPMP	2050	25% reduction by 2028 (NPMP)
Aim 1	Goal 7 Mitigating and adapting to climate change	TI_7 Extent of peat under restoration in Protected Landscapes	Natural England	9th May 2025	Area of peat committed for restoration by March 2025: 2463ha	2050	4000ha by 2028 12699ha by 2050
Aim 1	Goal 7 Mitigating and adapting to climate change	TI_8 Extent of tree canopy and woodland cover in Protected Landscapes	Forestry Commission	July 2025	PDNPA total land area: 143744 ha Total area of NFI Woodland: 11367 ha Target requires increase by: 4312 ha (3% land cover)	2050	750ha by 2028 5000ha by 2050
Aim 3	Goal 10 Enhancing beauty, heritage and engagement with the natural environment	TBC	Protected Landscape bodies	Unknown	n/a	n/a	(TBA)
Aim 1	Goal 10 Enhancing beauty, heritage and engagement with the natural environment	Decrease the number and percentage of nationally designated heritage assets in Protected Landscapes to be deemed at risk.	Historic England	9th May 2025	PDNPA heritage assets at risk by no of scheduled monuments: 10/473 listed buildings (grade I/II*/II): 7/2145 registered parks and gardens: 0/4 registered battlefields: 0/0 protected wreck sites: 0/0	n/a	(TBA)

FINANCIAL OUTTURN AND RESERVE APPROPRIATION 2024/25

1. Purpose

To inform Members of the outturn position of the Authority for the 2024/25 financial year and seek approval for appropriations to and from reserves.

2. Context

2.1 The National Park Core Grant for 2024/25 was held at the same value as 2023/24 & 2022/23 at £6.7m. The Authority also received additional grants in 2024/25, being £250k for revenue expenditure, to help offset rising inflationary pressures and £250k towards Capital expenditure. This additional funding did not form part of the original balanced revenue budget which was approved by Members in February 2024. The approved revenue budget forecast a surplus of **£280k** for 2024/25.

2.2 The Audit, Budget and Project risk Group, replaced the Budget Monitoring Group in 2024/25. This group is made up of Members, the Head of Resources, the Finance Manager and Officers, where required. The group meets quarterly to discuss budgets monitoring, adjusted forecasts, significant risks to budget and review the level of reserves. At the Q3 review meeting in January 2025, the revised forecasted revenue outturn was expected to be a surplus of circa **£454k**.

2.3 Appendix A shows the final draft surplus or deficit arising from each service, after appropriations to and from reserves have been considered. The draft revenue outturn closed with a surplus of **£530k**. The results have been scrutinised with budget managers and Heads of Service. They were presented and discussed with the ABPRG on the 09th May. Commentary on significant variances is presented in Appendix A. In January 2025, it was announced that the Authority would undertake an organisational restructure, due to the financial outlook of the Medium Term Financial Forecast (MTFF). A vacancy factor of 5% is already built in to balance our budget. However, as a result of the restructure, vacancy control was tightened and some areas impacted by the changes saw larger vacancy factors. We also received an additional £250k from Defra, to help offset inflationary pressures, as a result of the cost-of-living crisis. This helped offset material increases in areas such as Audit, IT and insurance premiums. This also helped cushion the deficit arising from lower than forecast planning income. Our strong cash holding continues to attract a generous return on investment. Our interest receipts were £104k surplus to budget. This is despite the interest rates starting to fall from August 2024. The full surplus of £530k has been transferred to the Medium Term Financial Forecast Reserve to help the balance the Authority budget across the Medium Term Financial Forecast (MTFF). The forecast amount of £454k discussed above in point 2.2, was included in Revenue Budget & MTFF, approved by Authority, in March 2025.

2.4 Appendix B shows the final draft outturn position, before the appropriation of reserves.

2.5 Appendix C shows the net reserve movements to and from reserves including the General Fund Reserve, Capital Reserves, Specific Reserves and Restricted Reserves. The General Reserve has sufficient funds, with a closing balance of £376k. This remains comfortably in the recommended position of 2% of net expenditure plus £100k contingency. A detailed summary of the use of reserves is also within the appendix.

2.6 Appendix D shows the draft Capital outturn result being **£563k**. Total expenditure in year was £938k. The outturn figure is after disposals and external funding is offset. The outturn was funded by the additional Capital Grant from Defra of £250k, Capital Reserves totaling £289k and £25k from the revenue budget.

2.7 The Aldern House Reserve has been renamed the Corporate Operational Reserve. This reserve will continue to be utilised for the operational requirements of the Authority such as funding the deficit created by the core grant reduction in 2025/26 and funding the redundancy payments that cannot be met from the Restructuring Reserve.

3. Proposals

3.1 Members are asked to consider the outturn position and reserve movements for 2024/25. Supporting appendices detail the draft closing positions for 2024/25. Members are asked to note the renaming of the Aldern House Reserve to the Corporate Operational Reserve and the creation of the Warslow Revenue Reserve.

4. Recommendations

4.1 Consider and note the draft Revenue and Capital Outturn position, Variance Analysis report for 2024/25 and reserve movements (Appendices A, B and D).

4.2 That the specific reserve appropriations for Revenue and Capital of £1.1m shown in Appendix C be approved.

4.3 To consider and note the renaming of the Aldern House Reserve to the Corporate Operational Reserve and the creation of the Warslow Revenue Reserve.

5. Corporate Implications

a. Legal

The Accounts and Audit Regulations 2015 require the Chief Finance Officer to sign the draft financial statements annually. For the 2024/25 financial year the statutory deadline for the publication of the draft Statement of Accounts was 30 June 2025. The accounts were available on the Authority's website from 28th May 2025. The Audit backstop deadline for publishing audited local authority accounts for 2024/25 has been confirmed as 27 February 2026. Work on the external audit is not scheduled to begin until September 2025, therefore it is expected to be complete and brought to Members in February 2026.

b. Financial

The financial implications are contained in the main body of the report.

c. National Park Management Plan and Authority Plan

The Authority Plan includes Objective D (Financial Resilience) – To be financially resilient and provide value for money.

d. Risk Management

The Chief Finance Officer has a statutory responsibility under Sections 25 – 28 of the Local Government Act 2003 to report to Members, the Monitoring Officer and external auditors on the robustness of the budget setting and monitoring process. They have an express duty to monitor the budget and underlying assumptions throughout the year, and to act when significant overspends or shortfalls in income occur. The Annual Governance Statement prepared by the Monitoring Officer is reported to and approved by Members. The Senior Management Team consider financial risks in the Risk Register during the year. The External Auditor considers the financial position of the Authority as part of the annual Value for Money conclusion. The recommendations within are considered to be part of the evidence to support the effectiveness of the value for money processes as they relate to the 2024/25 financial year.

e. Net Zero

There is no impact.

6. Background papers (not previously published)

None.

7. Appendices

Appendix A- Variance analysis 2024-25

Appendix B-Revenue Outturn 2024-25

Appendix C-Reserve appropriations and closing balances 2024-25

Appendix D-Capital outturn 2024-25

Report Author and Responsible Officer, Job Title and Publication Date

Author: Sinead Butler, Finance Manager and Chief Finance Officer. Responsible Officer:
Emily Fox, Head of Resources 17/06/2024

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Appendix A

Peak District National Park Authority 2024/25 Outturn & Variance analysis £'000s

Service & Department	Dept code	Col A (Overspend)	Col B Underspend	Col C Appropriations (to) from reserves	Col D Final Surplus
Assets & Enterprise					
Aldern House	CEA	(22)	-	22	-
Asset & Enterprise	CEJ	(1)	-	-	(1)
Asset & Enterprise Projects	VAP	-	-	-	-
CMP Team	CED	-	35	(35)	-
Car Parks & Toilets	CET	(87)	-	-	(87)
Car Parks - Non Estate	CEP	-	-	-	-
Concessions	CEI	(6)	-	-	(6)
Corporate Property Team	CES	(0)	-	-	(0)
Cycle Hire	CEB	(59)	-	57	(2)
Eastern Moors	CEE	(5)	-	-	(5)
Forestry & Woodlands	CFT	(46)	-	46	-
Grant Development	CEG	-	49	(24)	25
Minor Properties	CEM	(2)	-	-	(2)
North Lees Estate	CEN	(30)	-	30	-
Rural Estates Team	CEF	-	39	(22)	17
Trails	CEQ	(46)	-	46	-
Visitor Centres	CEV	-	129	(129)	(0)
Warslow Moors Estate	CEW	-	29	(50)	(21)
AMP7 Work	VM7	(83)	-	83	0
EA NFM Delivery	VK3	(160)	-	160	-
Great North Bog	VK1	(74)	-	74	-
MFF Partner Projects Extra	VM4	-	-	-	-
Mend Our Mountains	VM6	(7)	-	7	-
Moor Grn Inv Proj	VM8	-	44	(44)	(0)
Moor Resilience Project	VM9	-	213	(213)	-
Moor for Climate	VK2	-	199	(199)	0
MoorLIFE2020	VM3	-	-	-	-
Moors For Future 2	VC6	-	60	(60)	-
Moors for Future Team	CMF	(90)	-	90	-
NE Private Lands Projects	VM2	-	191	(191)	-
Working with SMB	VK4	-	240	(240)	(0)
AMP8 Project	VK8	(22)	-	22	-
<i>Moors for the future</i>		(436)	948	(512)	0
Assets & Enterprise total	TASS	(739)	1,229	(570)	(80)
Chief Executive Officer					
Corporate Management	ACS	-	120	(113)	7
Chief Executive Officer		-	120	(113)	7
Head of Paid Service					
Contingency	SLP	-	86	(30)	56
Head of Paid Service	HPS	-	86	(30)	56

Service & Department	Dept code	Col A (Overspend)	Col B Underspend	Col C Appropriations (to) from reserves	Col D Final Surplus
Landscape & Engagement					
Access & ROW	RRU	-	26	-	26
Access & ROW Proj	VAM	(7)	-	7	-
Countryside Volunteers	RRC	-	22	-	22
DEFRA Access Project	VC4	-	-	-	-
Engagement Admin	RRA	-	-	-	-
Engagement Projects	VED	(59)	-	59	0
Engagement Team	RRB	-	29	-	29
Farm & Countryside	RLF	-	15	-	15
Farming in Protected Landscapes	VPL	(23)	-	23	0
Land & Nature	RLN	(1)	-	24	23
Land & Nature Projects	VNE	-	36	(36)	0
Landscape & Engagement	RLE	-	0	-	0
Pennine Way	RRP	-	2	-	2
Rangers Projects	VCD	-	15	(15)	-
Rangers Specialist Vehicles	RRS	(1)	-	-	(1)
Rangers Team	RRE	-	50	(14)	35
Rangers Vehicle Fleet	RRV	-	6	-	6
Landscape & Engagement total	TLAN	(91)	201	48	158
Planning					
Cult Heritage Projects	VCH	-	-	-	-
Cultural Heritage	PCH	-	9	(1)	8
Development Control	PDC	(44)	-	50	6
Planning	PDP	(1)	-	-	(1)
Policy, Communities & Transport Planning	PPC	-	191	(187)	4
South West Peak Project	VSW	(5)	-	5	-
Strategic Planning	PDS	-	23	-	23
Planning Projects	VDP	-	54	(54)	-
Planning total	TPLN	(51)	277	(187)	40
Resources					
Communications & Marketing	AIM	-	38	-	38
Corporate Projects	VEF	-	10	(44)	(35)
Customer & Democratic Support	AIC	-	73	-	73
Finance	AFS	(91)	-	58	(33)
Information Management	AIT	(33)	-	33	0
Legal	ALE	-	14	(13)	1
Members	AME	-	11	-	11
People Management	APE	-	60	(30)	30
Resources	ARE	-	2	-	2
Sustainable Travel	AST	(40)	-	40	0
Strategy and Performance	ASP	-	66	(15)	51
Resources total	TRES	(164)	274	28	139
0					
Outturn Budget Surplus	XXX				(319)
Total		(1,044)	2,187	1,143	-
Outturn Budget Surplus					(319)
Interest Surplus					(104)
Revenue Grant Surplus					(107)
Appropriation of overall surplus to reserves				(530)	

KEY VARIANCES TO BUDGET

ASSETS & ENTERPRISE-Deficit £80k

Car parks-Deficit £87k

Non-pay-Deficit resulting from new car parking machines (£25k) Enforcement costs & historic billing (£35k)
New fee signage (£20k) various other (£7k)

Warslow-Deficit £21k

Non-pay-Deficit resulting from increased repairs & maintenance costs on aging properties, empty property rates premiums due to tenant turnover (£80k)

Income-Surplus income from RPA (£59k)

Visitor Centres & Cycle Hire

Visitor Centre & Cycle Hire came in largely on budget due to the utilisation of the donor money (£222k of the annual £237k allocated to balance the budget). The medium-term plan is for visitor centres to be cost neutral by 2027/28. The changes made in the recent organizational restructure, the outsourcing of Merchandising and the outputs by the Business Change Manager will be the key enablers to achieving.

LANDSCAPE & ENGAGEMENT-Surplus £158k

Access & Row-Surplus £26k

Non-pay-Various budget surpluses across supplies & services lines (£14k).

Pay-Surplus budget resulting from time charged against external projects (£12k)

Countryside Volunteers-Surplus £22k

Income-Additional chargeable work for Authority & external projects (£42k)

Non-Pay -Deficit budget due to materials & equipment for additional work (£17k)

Pay-Small Deficit to budget-Training/volunteer work (£3k)

Engagement Surplus £29k

Income-Surplus income resulting from additional school day visits (£7k)

Non-pay-Surplus budget driven by underspends in travel expenses and subscriptions (£9k)

Pay-Surplus budget due to vacancy savings and time charged to external projects (£13k)

Land & Nature-Surplus £23k

Pay-Surplus budget due to vacancy/grade savings (£23k)

Rangers Team-Surplus £35k

Income-Surplus income from Ranger walks & donations (£17k)

Non-pay-Surplus income in Volunteers expenses, rent, repairs and maintenance (£21k)

Pay-Deficit to budget due to the use of casuals (£3k)

PLANNING-Surplus £40k

Income-Deficit to budget due to the reduction in planning applications (£87k)

Non-Pay-Deficit across various spend lines (£5k)

Pay-Surplus budget due to Vacancy savings (£132k)

RESOURCES-Surplus £139k

CDST-Surplus £73k

Income-Surplus budget due to reimbursement of charges & postage costs (£3k)

Non-pay-Surplus budget in general admin and service costs (£23k)

Pay-Surplus budget due to vacancy savings and organisation restructure (£47k)

Finance-Deficit £33k

Income-Surplus budget due to grant received to help offset audit fees (£7k)

Non-pay-Deficit resulting from audit fees, audit adjustment fees & additional valuations fees for the implementation of the new IFRS16 accounting standard (£52k)

Pay-Surplus budget as staff fixed term contract ended earlier than expected (£12k)

People Team-Surplus £30k

Pay-Surplus arising from underspends against corporate training budget (£30k)

Remaining surplus budgets in **Communications (£38k)**, **Strategy & Performance (£51k)** & **Legal (£11k)** driven from vacancy savings and vacancy control as a result of the organisation restructure.

Corporate projects Deficit is our external debt repayment to PWLB. This doesn't have a budget attached but funded from the Defra core grant (£35k)

Corporate -Surplus £7k

Income-Surplus budget from corporate overhead recharges on new external projects (£29k)

Non-pay-Deficit due to increased employee insurance costs (£20k)

Pay-small Surplus (£2k)

Contingency-Surplus £56k

Pay-Surplus budget primarily as a result of lower than forecast pay award (£56k)

Surplus Interest-£104k

Strong investment interest in 2024/25, although rates are steadily dropping, resulted in stronger than forecast receipts -£464k versus a budget of £360k

Revenue Grant Surplus-£107k

Defra provided an additional Revenue grant of £250k in 2024/25, of which £107k is surplus

The overall surplus of £530 has been allocated to the Medium Term Financial Forecast Reserve, to enable the Authority to balance future years. The forecast surplus for 2024/25, presented and approved by Authority in March 2025, was expected to be a surplus of circa £454k. This has been included in the Medium Term Financial Forecast to offset the funding gap. Therefore, £76k is additional on top of what's already accounted for.

There may be adjustments to the final outturn during the external audit of the statement of accounts. The Authority's External Auditors (Mazars) are scheduled to start work in September and October 2025 and for the final position to be presented to Members in at the earliest available Authority meeting post sign off.

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Peak District National Park Authority 2024/25 Outturn £'000s
APPENDIX B

Rounding errors may occur		Col A	Col B	Col C	Col D	Col E	Col F	Col G	Col H
Service & Department	Dept code	Total Budget 2024/25	Reserves in Budget	Adjusted Budget 2024/25	Total Actuals 2024/25	Use of Revenue to fund Capital 2024/25	(Overspend)	Underspend	Variance
Assets & Enterprise									
Aldern House	CEA	138	-	138	160		(22)	-	-16%
Asset & Enterprise	CEJ	88	-	88	88		(1)	-	-1%
Asset & Enterprise Projects	VAP	-	-	-	-		-	-	0%
CMP Team	CED	186	-	186	151		-	35	19%
Car Parks & Toilets	CET	(171)	-	(171)	(109)	25	(87)	-	51%
Car Parks - Non Estate	CEP	-	-	-	-		-	-	0%
Concessions	CEI	(13)	-	(13)	(6)		(6)	-	49%
Corporate Property Team	CES	399	-	399	399		(0)	-	-0%
Cycle Hire	CEB	21	-	21	80		(59)	-	-274%
Eastern Moors	CEE	27	-	27	32		(5)	-	-19%
Forestry & Woodlands	CFT	69	(69)	-	46		(46)	-	-68%
Grant Development	CEG	186	-	186	137		-	49	26%
Minor Properties	CEM	(7)	-	(7)	(5)		(2)	-	24%
North Lees Estate	CEN	(57)	-	(57)	(26)		(30)	-	54%
Rural Estates Team	CEF	202	-	202	163		-	39	19%
Trails	CEQ	32	-	32	77		(46)	-	-144%
Visitor Centres	CEV	(39)	-	(39)	(168)		-	129	-331%
Warslow Moors Estate	CEW	(94)	-	(94)	(123)		-	29	-31%
AMP7 Work	VM7	0	-	0	83		(83)	-	
EA NFM Delivery	VK3	-	-	-	160		(160)	-	
Great North Bog	VK1	(0)	-	(0)	74		(74)	-	
MFF Partner Projects Extra	VM4	-	-	-	-		-	-	
Mend Our Mountains	VM6	-	-	-	7		(7)	-	
Moor Grn Inv Proj	VM8	(0)	-	(0)	(44)		-	44	
Moor Resilience Project	VM9	0	-	0	(213)		-	213	
Moor for Climate	VK2	0	-	0	(199)		-	199	
MoorLIFE2020	VM3	-	-	-	-		-	-	
Moors For Future 2	VO6	(0)	-	(0)	(60)		-	60	
Moors for Future Team	CMF	32	-	32	122		(90)	-	
NE Private Lands Projects	VM2	-	-	-	(191)		-	191	
Working with SMB	VK4	(0)	-	(0)	(240)		-	240	
AMP8 Project	VK8	-	-	-	22		(22)	-	
<i>Moors for the future</i>		32	-	32	(480)	-	-	512	
Assets & Enterprise	TASS	998	(69)	930	415	25	(739)	1,229	49%
Chief Executive Officer									
Corporate Management	ACS	60	-	60	(61)		-	120	201%
Chief Executive Officer		60	-	60	(61)	-	-	120	201%

Peak District National Park Authority 2024/25 Outturn £'000s

APPENDIX B

Rounding errors may occur		Col A	Col B	Col C	Col D	Col E	Col F	Col G	Col H
Service & Department	Dept code	Total Budget 2024/25	Reserves in Budget	Adjusted Budget 2024/25	Total Actuals 2024/25	Use of Revenue to fund Capital 2024/25	(Overspend)	Underspend	Variance
Contingency	HPS	49	-	49	(37)	-	-	86	177%
Landscape & Engagement									
Access & ROW	RRU	62	-	62	37		-	26	41%
Access & ROW Proj	VAM	5	(5)	-	7		(7)	-	-141%
Countryside Volunteers	RRC	112	-	112	90		-	22	20%
DEFRA Access Project	VC4	-	-	-	-		-	-	0%
Engagement Admin	RRA	-	-	-	-		-	-	0%
Engagement Projects	VED	0	-	0	59		(59)	-	
Engagement Team	RRB	271	-	271	243		-	29	11%
Farm & Countryside	RLF	177	-	177	163		-	15	8%
Farming in Protected Landscapes	VPL	0	-	0	23		(23)	-	
Land & Nature	RLN	231	-	231	232		(1)	-	-0%
Land & Nature Projects	VNE	298	(298)	0	(36)		-	36	12%
Landscape & Engagement	RLE	84	-	84	84		-	0	0%
Pennine Way	RRP	1	-	1	(1)		-	2	204%
Rangers Projects	VCD	(24)	-	(24)	(39)		-	15	-62%
Rangers Specialist Vehicles	RRS	4	-	4	5		(1)	-	-16%
Rangers Team	RRE	519	-	519	469		-	50	10%
Rangers Vehicle Fleet	RRV	35	-	35	29		-	6	17%
Landscape & Engagement	TLAN	1,776	(303)	1,473	1,364	-	(91)	201	6%
Planning									
Cult Heritage Projects	VCH	-	-	-	-		-	-	0%
Cultural Heritage	PCH	315	-	315	306		-	9	3%
Development Control	PDC	799	(97)	702	746		(44)	-	-6%
Planning	PDP	88	-	88	89		(1)	-	-1%
Policy, Communities & Transport Planning	PPC	255	(17)	239	48		-	191	75%
South West Peak Project	VSW	-	-	-	5		(5)	-	0%
Strategic Planning	PDS	236	-	236	213		-	23	10%
Planning Projects	VDP	-	-	-	(54)		-	54	0%
Planning	TPLN	1,694	(114)	1,580	1,353	-	(51)	277	13%
Resources									
Communications & Marketing	AIM	237	-	237	199		-	38	16%
Corporate Projects	VEF	-	-	-	(10)		-	10	0%
Customer & Democratic Support	AIC	525	-	525	451		-	73	14%
Finance	AFS	408	(26)	382	474		(91)	-	-22%
Information Management	AIT	846	(104)	743	776		(33)	-	-4%
Legal	ALE	351	(56)	294	281		-	14	4%
Members	AME	132	-	132	121		-	11	8%
People Management	APE	468	-	468	407		-	60	13%
Resources	ARE	86	-	86	84		-	2	2%
Sustainable Travel	AST	48	(48)	0	40		(40)	-	-83%
Strategy and Performance	ASP	244	-	244	178		-	66	27%
Resources	TRES	3,344	(233)	3,111	3,001	-	(164)	274	3%
Total									
Total		7,921	(718)	7,202	6,035	25	(1,044)	2,187	14%

Movement on Reserves and Reserve Levels

			App A Col B & App B Col G	App A Col A & App B Col F	App A Col C			
	<u>Opening Balance 01/04/2024</u>	<u>Additional park grant- Residual</u>	<u>interest receipts above/ (below) budget</u>	<u>Impact of underspends / income at year end</u>	<u>Impact of overspends at year end</u>	<u>Further Reserve requests</u>	<u>Use of Reserves for Capital</u>	<u>Closing Balance 31/03/25</u>
General Fund	375,769	106,628	103,573	2,186,903	(1,044,066)	(1,353,040)		375,769
	375,769	106,628	103,573	2,186,903	(1,044,066)	(1,353,040)		375,767
<u>Specific Reserves</u>								
Car Parks & Facilities	20,410					-	-	20,410
Trails Reserve	567,423					(45,533)	16,948	538,838
Corporate Property Reserve	95,303					(22,128)	-	73,175
Minor Properties	18,045					-	-	18,045
IT Reserve	372,081					95,000	(38,100)	428,981
Warslow Reserve	-					49,788	-	49,788
Woodlands Reserve	7,674					42,240	-	49,914
North Lees Reserve	117,837					(30,452)	-	87,385
Vehicle Reserve	26,500					-	-	26,500
Maintenance Reserve	21,545					-	-	21,545
Minerals Reserve	566,852					-	-	566,852
Restructuring Reserve	725,309					(23,725)	-	701,584
VAT Reserve	220,000					-	-	220,000
Corporate Operational Reserve	1,670,686					(123,976)	-	1,546,710
CMPT Reserve	56,341					34,833	-	91,174
Local Plan Reserve	129,000					186,501	-	315,501
Authority Delivery Plan Reserve	217,297					(40,000)	-	177,297
Matched Funding Reserve	533,543					(43,062)	-	490,481
Slippage Reserve	84,798					-	-	84,798
MTFF Finance Reserve	286,000					539,666	-	825,666
	5,736,644	-	-	-	-	619,152	(21,152)	6,334,644
<u>Restricted Funds</u>								
Revenue Grants Reserve	2,405,812					734,812	-	3,140,624
Bequests	138,831					(925)	-	137,906
Capital Reserve	1,321,427					-	(267,738)	1,053,689
	3,866,070	-	-	-	-	733,887	(267,738)	4,332,219
	9,978,484	106,628	103,573	2,186,903	(1,044,066)	-	(288,891)	11,042,633

Movements to and from reserves

Reserve	Movements In 24/25	Movements Out 24/25	Net Movement
543000: Capital Fund	59,275	- 327,013	- 267,738
540001: Trails	16,948	- 45,533	- 28,585
540002: Corporate Property Reserve	-	- 22,128	- 22,128
540004: IT Reserve	95,000	- 38,100	56,900
540005: Warslow Revenue Reserve	49,788	-	49,788
540007: Woodlands Reserve	42,240	-	42,240
540009: North Lees Reserve	-	- 30,452	- 30,452
540013: Restructuring Reserve	-	- 23,725	- 23,725
540016: Corporate Operational Reserve	66,992	- 190,968	- 123,976
540017: CMPT Reserve	34,833	-	34,833
540018: Local Plan Reserve	186,501	-	186,501
540019: Authority Delivery Plan Reserve	-	- 40,000	- 40,000
540020: Matched Funding Reserve	45,630	- 88,692	- 43,062
540022: MTFP Finance Reserve	539,667	-	539,667
541000: Revenue Grants Reserve	1,294,979	- 560,167	734,812
541004: Alan Beardsley Bequest	-	- 925	- 925
Net movement Revenue & Capital Reserves	2,431,852	- 1,367,702	1,064,150

Reserve appropriations detailed summary

- a. Reserve appropriations, shown in Appendix C, resulted in a net movement of £1.33m into revenue reserves and £268k from capital reserves.
- b. The draft surplus on the revenue outturn is for 2024/25 is £530k and has been fully transferred to the Medium Term Financial Forecast Reserve, as discussed in the covering report. A further £10k was moved this reserve during the year resulting in the overall movement in of £540k.
- c. Revenue Grants Reserve closed with a net movement of £735k into the reserve, for future projects and planned ringfenced operational expenditure.
- d. Other key reserve movements (Movements in/Movements out)

IT Reserve: Phasing of spend on the digitisation project was ringfenced to be spent in 2025/26 (£45k) and forecast replenishment of the reserve for future inflationary hikes/disaster recovery resilience (£50k) offset by planned spend on the Fixed Asset system, Tech Forge & Civica (£38k)

Warslow Revenue Reserve: The creation of the Warslow Revenue Reserve, to help offset future repairs & maintenance requirements of the estate, that cannot be met from the baseline budget. The Authority received unbudgeted income from the RPA from prior years, and this has been ringfenced to support ongoing revenue requirements (£50k)

Woodlands Reserve: Continuation of the ash dieback work/woodland recovery (£42k)

Corporate Operational Reserve: Agreed funding at 2024/25 budget setting for pay and internal projects (£217k) offset by approved and allocated spend for 2025/26 operational requirements (£67k)

Local Plan Reserve: Receipt of Government Grant for continued execution of Local Plan (Reg 18 phase) (£227k) offset by spend in the year (£40k)

Authority Delivery Plan: Agreed funding at 2024/25 budget setting for Sustainable Travel Officer (£40k)

Matched Funding Reserve: Agreed funding at 2024/25 budget setting for matched funded projects (£89k) offset by unrestricted bequest received in year (£44k) & small movement in from Cultural Heritage (£2k)

All other movements agreed from forecast budget surpluses/deficits

		Expenditure			Funding Sources for Expenditure								Outturn			Col N
		Col A	Col B	Col C	Col D	Col E	Col F	Col G	Col H	Col I	Col J	Col K	Col B	Col L	Col M	
		Budget	Actual	Variance	Govt Grant	Grants	Capital Receipts	Capital Receipts (WM)	Specific Reserves	Capital Grants Unapplied	Revenue	Borrowing/CF R	Expenditure	Income	Outturn	
CAPITAL OUTTURN																
Assets & Enterprise																
Hathersage YHA		1,000,000		1,000,000									-	-	-	Project will not go ahead Residual spend less than received in grant
Boarsgrove land purchase	C14	23,500	8,486	15,014	-	-	-	-	(8,486)	-	-	8,486	-	8,486		
Warslow Moor																
Knowle House Farm Agri Buildings	C20	75,000	80,936	(5,936)	-	-	(2,931)	(78,004)	-	-	-	-	80,936	-	80,936	Complete - final certification in progress. Additional spend approved in year up to £79k RMM May 24. Still slight overspend About 75% complete - valuation and certification in progress. Likely overspend due to additional requirements 80%+ complete - final certification likely to be in April. Additional spend approved during the year up to £138k RMM Sept 24
Pump Farm Farm Buildings	C22	170,000	150,229	19,771	-	-	(150,229)	-	-	-	-	-	150,229	-	150,229	
Dale Cottage Refurb	C23	50,000	99,192	(49,192)	(99,192)	-	-	-	-	-	-	-	99,192	-	99,192	
New Road Farm	C17	130,000	142,525	(12,525)	(142,525)	-	-	-	-	-	-	-	142,525	-	142,525	Complete - spend in year approved up to £149k RMM May 24
Pump Farmhouse																Final renovation certificate, budget not incl in 24/25 as most of work complete 23/24 Complete, no more expenditure. Project Delayed to 2025/26 Project Delayed to 2025/26
Hayes Farm Bore Hole	C09		45,885	(45,885)	-	-	-	(45,885)	-	-	-	-	45,885	-	45,885	
Brownhills Farm Heating System	C11	10,000	10,648	(648)	(8,283)	-	-	(2,365)	-	-	-	-	10,648	-	10,648	
Big Fernyford Reroofing Cattle Sheds		20,000		20,000												Remaining cost on project, asset largely complete in 23/24 Project complete
Operational Assets																
Millers Dale Changing Place	C10	10,000	6,120	3,880	-	(6,120)	-	-	-	-	-	-	6,120	(54,500)	(48,380)	
Cressbrook Bridge	C15	199,000	177,633	21,367	(108,521)	(30,000)	(20,000)	-	-	(19,112)	-	-	177,633	(138,521)	39,112	Project complete - not included in Budget as Business case approved during the year
Parsley Hay Changing Place																
	C24	-	82,333	(82,333)	(55,500)	(26,250)	-	-	(583)	-	-	-	82,333	(81,750)	583	
Chee Dale Bridge																Project complete - not included in Budget as Business case approved during the year Some of approved spend used for Dale Cottage increased approval Project pushed back Project pushed back Project pushed back
	C25	-	59,814	(59,814)	(40,000)	-	-	-	(19,814)	-	-	-	59,814	(40,000)	19,814	
Condition Survey Work	C02	450,000	-	450,000	-	-	-	-	-	-	-	-	-	-	-	
Visitors Centres Lettable Space		100,000		100,000												Approved Business case but work not started in 24/25 Project pushed back Project pushed back
Concrete Repairs to Aldern House		75,000		75,000												
Car Parks Expansion		250,000		250,000												
North Lees																Car Park Machines not included in original Budget. Funded from Revenue income Most Trails work included as Revenue
Cruck Barn	C26	193,000	-	193,000	-	-	-	-	-	-	-	-	-	-	-	
Renewables	tbc	132,300	-	132,300												
Holiday Let	tbc	27,800	-	27,800												Techforge upgrade
Car Park Machines	C16		24,795	(24,795)	-	-	-	-	-	(24,795)	-	-	24,795	-	24,795	
Trails Structures Capital Works	C13	180,000	11,035	168,965	-	-	-	(11,035)	-	-	-	-	11,035	-	11,035	
Assets & Enterprise - Total		3,170,600	899,631	2,270,969	(454,021)	(62,370)	(173,160)	(126,255)	(31,432)	(27,598)	(24,795)	-	899,631	(314,771)	584,860	
Resources																
IT Capital - Software	C01	38,000	38,100	(100)					(38,100)				38,100		38,100	
Resources - Total		38,000	38,100	(100)	-	-	-	-	(38,100)	-	-	-	38,100	0	38,100	
Total		3,208,600	937,731	2,270,869	(454,021)	(62,370)	(173,160)	(126,255)	(69,532)	(27,598)	(24,795)	-	937,731	(314,771)	622,960	
CAPITAL DISPOSALS																
Assets & Enterprise																
Land Sales - Shay side Farm & Methoc	C21	-	-	-	-	-	-	-	-	-	-	-	-	(59,275)	(59,275)	Moved to Capital Receipts Reserve - Warslow Moor
Assets & Enterprise - Total		-	-	-	-	-	-	-	-	-	-	-	-	(59,275)	(59,275)	
Total		3,208,600	937,731	2,270,869	(454,021)	(62,370)	(173,160)	(126,255)	(69,532)	(27,598)	(24,795)	-	937,731	(374,046)	563,685	

Surplus/Deficit	
Capital Expenditure	937,731
Capital income	(314,771)
Capital Disposals	(59,275)
Total outturn	563,685

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INTERNAL AUDIT REPORT BLOCK 2 2024/25

1. Purpose

The report presents to Members the Internal Auditors recommendations for the second block of the 2024/25 audit and the agreed actions for consideration. Thomas Absalom, Internal Audit Manager – Audit Assurance, Veritau will be present at the meeting and available answer any Members questions on the report.

2. Context

2.1 The Auditors give an opinion based on four grades of assurance. Substantial Assurance, Reasonable Assurance, Limited Assurance and No Assurance. Volunteering and Income received a rating of Substantial assurance. Reserves received a rating of Reasonableness Assurance.

2.2 The priority of agreed actions is determined based on a rating of Critical, Significant, Moderate and Opportunity. Reserves received two Moderate findings. Income received two Moderate findings and Volunteering received none. Follow up actions and implementation deadlines have been agreed with responsible managers and further details can be found within Appendix 1-3.

3. Proposals

3.1 Managers have carefully considered the internal auditors' recommendations and the agreed actions are set out in the audit reports in Appendices 1 - 3 for Members consideration.

4. Recommendations

4.1 That the Internal Audit reports for the three areas covered under Block 2 for 2024/25 Income, Volunteering & Reserves (in appendices 1-3 respectively) be received and the proposed actions agreed.

5. Corporate Implications

a. Legal

Pursuant to Regulation 5 of the Accounts and Audit Regulations 2015, the Authority, as a relevant authority defined in paragraph 2, Schedule 2 of the Local Audit and Accountability Act 2014, must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.

b. Financial

There are resource implications of implementing recommendations and this is why the priority rating of recommendations are important, as this has to be managed with existing budgets and staffing levels, taking account of the level of risk agreed by management. The cost of the Internal Audit Service Level Agreement is included within the overall Finance Budget.

c. National Park Management Plan and Authority Plan

The Authority Plan includes Objective F (Governance) - to have best practice governance arrangements in place.

d. Risk Management

The Internal Audit process is regarded as an important part of the overall internal controls operated by the Authority. Our Internal Auditors provide independent assurance that internal controls are functioning as intended. They will report significant risks back to management and offer recommendations to combat such risks.

e. Net Zero

With the exception of attendance at Authority meetings where required, all meetings with Internal Auditors are held virtually, reducing the associated emissions caused by business travel.

6. Background papers (not previously published)

None.

7. Appendices

Appendix 1: Internal Audit Report-Volunteering

Appendix 2: Internal Audit Report-Income

Appendix 3: Internal Audit Report-Reserves

Report Author and Responsible Officer, Job Title and Publication Date

Author: Sinead Butler, Finance Manager & Chief Financial Officer. Responsible Officer: Emily Fox, Head of Resources 29/05/2025

INTERNAL AUDIT REPORT

VOLUNTEERING

PEAK DISTRICT NATIONAL PARK AUTHORITY

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	Critical	Significant	Moderate	Opportunity
Findings	0	0	0	0
Overall audit opinion	Substantial assurance			

Status: Final

Date Issued: 14 May 2025

Responsible Officer: Finance Manager

INTRODUCTION

The Peak District National Park Authority relies on volunteers to support its conservation, visitor engagement and community initiatives. According to the authority's Volunteer development plan 2024-2028 there were 1641 registered volunteers who had contributed a total of fifty-three thousand hours to maintaining the park, biodiversity projects, guided walks and educational outreach work alongside core staff. Volunteers play a vital role in protecting the park's natural heritage while enhancing visitor experiences, which wouldn't be possible with core funded services alone.

To strengthen volunteer management and retention, the authority has introduced a new volunteering development plan covering 2024-2028 and has restructured some elements of its volunteer management. The plan outlines a seven-step process to reviewing and improving current practice and a future vision of what the service will look like, including having a one team model and making better use of its BetterImpact volunteer management software.

OBJECTIVES AND SCOPE

The purpose of this audit was to provide assurance to management that procedures and controls within the system ensure that:

- ▲ Policies, risk management and systems adequately support volunteer engagement, retention and compliance with governance requirements.
- ▲ The volunteer programme is effectively managed, with clear processes for recruitment, training and resource allocation.
- ▲ Financial and administrative procedures, including expense reimbursement and budget management, are efficient and well managed.

This audit included review the volunteer cycle from recruitment to retention, and the policies and systems used to manage the resource.

KEY FINDINGS

There is a robust and accessible framework of volunteer policies and guidance, that is easily available to all volunteers. The BetterImpact volunteering system and MyImpact mobile app requires confirmation from volunteers they have read, and accepted mandatory policies and prevents access to the system if not accepted. The BetterImpact system provides good management information and is used extensively for the management of volunteering. Admin rights are appropriately limited. Risk assessments are available for all volunteering activities and are used alongside the Health and Safety Policy. Volunteer records, including personal details, training and qualifications are effectively managed through the BetterImpact system and the MyImpact mobile app, which also support communication, activity details and role booking, including access control based on current training.

Volunteer experience is enhanced through centralised management, allowing for better oversight of numbers, training status and resources planning. Volunteer satisfaction is supported through social media updates and thank you emails following completion of an activity. Feedback is collected via an annual satisfaction survey, which is reportedly well used. The absence of a formal record of exit survey records means potential insights into improvements may be missed.

Volunteering opportunities are well promoted across various platforms with a clear and consistent message. The sign-up process is straightforward through a single route via the software. Applications are processed promptly, and volunteers only need to register once and can see all activities. While the process is efficient, reliance on digital access may exclude individuals without internet or computer skills. New volunteers receive thorough induction resources and can trial shifts alongside experience team members. Training is tailored to roles and well managed.

The expense claim process is being streamlined with monthly payments replacing the previous quarterly cycle, reducing delays. Central checks and approval ensure accuracy and improve efficiency. However, new arrangements that have increased eligibility and required estimates of claim volumes means there is some uncertainty in the budget for this year. Some contingency exists but if claims exceed expectations, potential actions include pausing activities or expense reimbursements, though the latter may conflict with Volunteer Bureau requirements and affect recruitment strategies.

OVERALL CONCLUSIONS

A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited. Our overall opinion of the controls within the system at the time of the audit was that they provided Substantial Assurance.

Audit opinions

Audit work is based on sampling transactions to test the operation of systems. It cannot guarantee the elimination of fraud or error. Our opinion is based on the risks we identify at the time of the audit. Our overall audit opinion is based on four grades of opinion, as set out below.

Opinion	Assessment of internal control
Substantial assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.
Finding ratings	
Critical	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Significant	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Moderate	The system objectives are not exposed to significant risk, but the issue merits attention by management.
Opportunity	There is an opportunity for improvement in efficiency or outcomes but the system objectives are not exposed to risk.

Where information resulting from audit work is made public or is provided to a third party by the client or by Veritau then this must be done on the understanding that any third party will rely on the information at its own risk. Veritau will not owe a duty of care or assume any responsibility towards anyone other than the client in relation to the information supplied. Equally, no third party may assert any rights or bring any claims against Veritau in connection with the information. Where information is provided to a named third party, the third party will keep the information confidential.

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INTERNAL AUDIT REPORT

INCOME

PEAK DISTRICT NATIONAL PARK AUTHORITY

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	Critical	Significant	Moderate	Opportunity
Findings	0	0	2	0
Overall audit opinion	Substantial assurance			

Status: Final

Date Issued: 19 May 2025

Responsible Officer: Chief Financial
Officer

INTRODUCTION

The Peak District National Park Authority (PDNPA) administers the Peak District National Park and looks after the national park to an agenda set out by central government. It works in partnership with other organisations and individuals. To do this it is funded by income areas including the DEFRA Core Grant, External Funding and Earned Income.

Farming in Protected Landscapes (FiPL) is a dedicated grant programme for farmers and land managers within the park authority, these grants are funded from the DEFRA FiPL grant. In 2023/24 grant funding was £1.921m and in 2024/25 the continued grant funding is £2.6m.

The PDNPA works closely with its official charity, the Peak District National Park Foundation. The charity was established to raise funds to care for the Peak District National Park and make it more inclusive. It is funded partially by an annual operating grant of £130k from the PDNPA, this grant has been agreed until 2028 (decreasing in size from 2026 onwards). Budgeted income from the Foundation for 2024/25 is circa £250k.

OBJECTIVES AND SCOPE

The purpose of this audit was to provide assurance to management that procedures and controls within the system ensure that:

- ▲ All stages of the FiPL process are appropriately monitored and documented, and completion of the application is confirmed prior to payment of the grant.
- ▲ The terms of the Agreement between the PDNP Authority and the PDNP Foundation are complied with and value for money and growth being achieved.

The audit included a review of FiPL grant funding received to commitments and payments made to applicants (both farmers and internal Authority grants) ¹⁺² and the processes in place to ensure that the Foundation appropriately accounts for, and distributes all donations received.

¹ [FiPL Guidance for Applicants_04_2025.pdf](#)

² [Annex-O-Process-Flows-Applicant-and-PL-Journey.pdf](#)

KEY FINDINGS

We found that DEFRA grant funds for FiPL had all been received in full, however, funds had not always been received in line with the quarterly application schedule. These delays were caused by DEFRA in 2024/2025, due to the nature of funding being split between capital and revenue. Additional funding has been applied for and received for specific projects via bid application. We found appropriate approval mechanisms in place for the FiPL application process. Applications above £10k are approved at regular meetings of the Local Assessment Panel (LAP), and applications below £10k are scored and approved by the Head of Landscape and Engagement. Meetings of the LAP include reporting of the budget position, new applications for approval and updates for applications relating to additional funding requests.

We reviewed a sample of applications for FiPL grants, including one from the PDNPA, and found compliance with the process set out in the guidance published for applicants on the PDNPA website, including recording of applications received, correspondence for successful applications, and receipt and retention of appropriate records for payment claims. We found that claims were received and paid upon completion of item/activity recorded in the Agreement, and where payment was made in advance of full completion of an activity (within the project) the details within the claim schedule were sufficient to evidence that the claim was appropriate to be paid. We confirmed that monitoring returns are completed, and submitted to DEFRA quarterly, these detail all projects, claims and progress. However, we found that some improvements could be made relating to the completion of fields within the monitoring returns, and with the issuing of extension letters for projects that were not completed within the agreed timescale.

The Agreement between the PDNPA and the Peak District National Park Foundation (the Foundation) sets out the terms to be met by both parties. We confirmed that the direct grant payment of £130k to the Foundation was made in line with the schedule and appropriately approved by the Head of Service. The direct grant has enabled the Foundation to support its philanthropy and increase third party funding. The PDNPA has applied for funds from the Foundation, which transactional detail in the finance report received for the audit showed that the PDNPA had received donations and contributions that provided a return of £545k (419%) in 2024/25 when comparing the value of the grant to income received. These included donations of £237k to support the operation of Visitor Centres, £10k for an AI project, and £5.5k for a sensory and vegetable garden, demonstrating a good use of funds with the investment leading to positive outcomes and growth in projects for the PDNPA.

Discussion with the Foundation Director and through examination of the Foundation Annual Accounts confirmed that the terms of the Agreement are being complied with and that the grant funding is stated along with confirmation that the grant is being used for the purposes for which it was paid, and the accounts also provide details of third-party funding. However,

we found some areas of non-compliance with the Agreement which are detailed in finding 2.

From examination, whilst we found that the Foundation has linked social media posts to the PDNPA social media accounts, there has been no clear use of the PDNPA logo and any references are only linked to text.

OVERALL CONCLUSIONS

Overall, good management of risk with few weaknesses identified. An effective control environment is in operation but there is scope for further improvement in the areas identified. Our overall opinion of the controls within the system at the time of the audit was that they provided Substantial Assurance.

1 Consistency and completeness of the DEFRA monitoring report and supporting documents

Moderate

Control weakness

Lack of completion of fields in monitoring returns.

Lack of evidence of a project timescale extension where we expected to see one.

What is the risk?

The FiPL team do not record sufficient information to enable adequate review that project timescales are being achieved.

Findings

The application process includes that applicants provide updates to the PDNPA on progress of the project, and that completion of the project is confirmed.

We reviewed a sample of 10 applications and entries in the monitoring return and found the following:

- ▲ All projects were supported with satisfactory evidence of progress and completion where required.
- ▲ Records of site visits and updates from the applicant and/or consultants were retained.
- ▲ Extension letters were sent for 3 out of 4 projects that had not achieved the agreement end date.
- ▲ The PDNPA project 'Chee Dale Footbridge Replacement' was expected to be completed by 31 January 2025, no claims have been made against this project and no extension letter was evident in the documents supplied.
- ▲ Date fields for 'start confirmed' and 'progress visits' were not completed in the monitoring spreadsheet.

In addition, we undertook a wider review of the monitoring return. This identified that, for the 134 applications recorded as received and completed since 1 April 2023:

- ▲ 3 had the start date confirmed.
- ▲ 1 had progress visit(s) recorded.
- ▲ 11 had progress on outputs/outcomes recorded.
- ▲ 91 had date completed recorded, 63 of which had date confirmed and by whom recorded.

The FiPL team should ensure that fields are recorded for visits and completion to facilitate accurate monitoring for the completion of projects. A consistent approach to recording the values in the monitoring return will assist in analysis of

projects achieving outputs within agreed timescales.

Agreed action:

We will ensure that extension letters are sent to all approved projects, where required, including any internal projects relating to Peak District National Park

From 2025/26, we will ensure the monitoring return is completed fully, to include start dates, progress visits, outcomes and outputs and completion dates. This is key information should we be audited externally by DEFRA or other Government led audits.

Responsible officer: FIPL Manager

Timescale: 30 June 2025

2 Compliance with the Foundation Agreement

Moderate

Control weakness

Presentation of the Foundation annual financial and operational report could not be supplied or evidenced within PDNPA meeting records.

What is the risk?

Lack of evidence supplied to the Authority that the Foundation are achieving the aims of the Agreement.

Findings

The Agreement between the PDNPA and the Foundation includes that:

Monitoring and Reporting:

6.2 The R shall provide the A with an annual financial and operational report on its use of the Grant and delivery of the Project...

6.3 The R shall provide the A's Performance and Resource Committee with a financial report and operational report on its use of the Grant and delivery of the Project annually...

The Foundation confirmed that they had supplied annual accounts and update reports to the Authority for each financial year, yet copies were not supplied to us due to the Director not being able to access the documents presented as they were not in post at the time of the last reporting period. We found the supply of the 2021/22 report recorded in the meeting record of the National Park Authority February 2023. Whilst we were supplied with the Agenda for the NPA Members Forum, July 2024, which confirmed an item 'Peak District National Park Foundation – Presentation', a record of the meeting to confirm that the presentation had been supplied in line with the Agreement could not be provided for the audit.

Agreed action:

The Foundation will present the annual financial and operational report in July 2025 to the Programme & Resources Committee. This will fulfil the grant clauses to include 1) How the Authority funding is being utilised. 2) Other funding secured by the Foundation and how this has been spent and 3) Operationally, what has been delivered. This will then be

presented annually, and the reporting will be recorded in meeting minutes, most likely to the new Resources Committee in July.

Responsible officer: Foundation Chief Executive

Timescale: 31 July 2025

Audit opinions

Audit work is based on sampling transactions to test the operation of systems. It cannot guarantee the elimination of fraud or error. Our opinion is based on the risks we identify at the time of the audit. Our overall audit opinion is based on four grades of opinion, as set out below.

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Finding ratings

Critical	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Significant	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Moderate	The system objectives are not exposed to significant risk, but the issue merits attention by management.
Opportunity	There is an opportunity for improvement in efficiency or outcomes but the system objectives are not exposed to risk.

Where information resulting from audit work is made public or is provided to a third party by the client or by Veritau then this must be done on the understanding that any third party will rely on the information at its own risk. Veritau will not owe a duty of care or assume any responsibility towards anyone other than the client in relation to the information supplied. Equally, no third party may assert any rights or bring any claims against Veritau in connection with the information. Where information is provided to a named third party, the third party will keep the information confidential.

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RESERVES

PEAK DISTRICT NATIONAL PARK AUTHORITY

	Critical	Significant	Moderate	Opportunity
Findings	0	0	2	0
Overall audit opinion	Reasonable Assurance			

INTERNAL AUDIT REPORT

Status: Final

Date Issued: 23 May 2025

Responsible Officer: Finance Manager

INTRODUCTION

The requirement for financial reserves is acknowledged in statute with local authorities needing to have regard to the level of reserves needed for meeting estimated future expenditure when calculating the budget requirement. Reserves also function as a safeguard against unforeseen events and to address expected challenges. They are essential to the Peak District National Park Authority (the Authority) to help support service delivery. The Authority's 2024/25 budgeted net revenue expenditure was £7.97m.

The Authority has specific amounts as reserves for future National Park purposes or to cover contingencies which are not restricted by accounting rules or legal limitations (usable reserves). At 31 March 2024, total usable reserves per the Authority's statement of accounts was £9.971m, broken down as follows:

Usable reserve	£k
General Fund	369
Restricted Funds	139
Specific reserves (earmarked)	8,142
Capital receipts reserve	1,321
Total	9,971

Organisations need to have in place processes which assess the adequacy of reserves and ensure there are clear processes in place for their establishment and use. CIPFA's Bulletin 13, issued in March 2023, provides further detail to support the effective management of reserves and balances, in a local authority setting.

OBJECTIVES AND SCOPE

The purpose of this audit was to provide assurance to management that procedures and controls within the system ensure that:

- ▲ Appropriate procedures are in place to assess the adequacy of reserves
- ▲ All usable reserves are subject to appropriate review and approval

KEY FINDINGS

The Financial Reserves for the Peak District National Park (PDNPA) are classified into 4 different types: general reserves, capital reserves, specific reserves and restricted reserves. The general reserves are calculated on the basis of a recommended level which is 2% of net expenditure (approximately £160k), with a trading contingency of £100k, giving a base level of £260k. For the 2022/23 Statement of Accounts, the general reserve balance was £616k. Although specific reserves are used to support individual service areas, they should be available to support any Authority priority if required for operational and strategic requirements. Capital reserves are only available to support capital expenditure, and Restricted reserves can only be used for specific purposes. For the 2024/25 financial year, the Authority held a total of £9.913m in reserves, with £5.737m (58%) of this held in specific reserves used by the service areas. It is these specific reserves which were reviewed as part of this audit.

Local Authorities are required to follow certain regulations and accounting standards when managing their finances, including how they hold and use reserves. Under the Local Government Act 2003, the Chief Finance Officer (CFO) must report on the adequacy of reserves as part of the budget-setting process. Although the PDNPA does not currently have a reserves policy, reserve levels and their adequacy are reviewed annually as part of the budget setting process.

We established that current specific reserve levels and any potential planned use of these reserves are reviewed as part of the mid-year review and quarter three reviews held with budget holders. A mid-year review form is completed and includes a section for planned use of reserves to be detailed up to year end. However, we found that there were no formal processes for determining or reviewing the adequacy of the individual specific reserve levels, nor was there any formal process followed within the service area and no corporate guidance was available on what specific reserve levels should be. The Authority recognise that several specific reserves would benefit from being replenished, but it is not currently financially viable.

We confirmed that reserves are monitored during the year as part of the standard budget monitoring process at the mid-year point quarter three and year end. The Finance Manager is aware of potential or planned uses of some specific reserves, as indicated during the budget monitoring cycles but no transactions to move funds are carried out until the year end closedown process. Allocations from corporate reserves are tracked by the Finance Manager, and SMT are updated regularly on the rolling balance. The Audit, Budget & Project Risk group meet four times a year and they are also updated on the reserves position. Authority signs off the movements to and from reserves as part of the outturn approval in July annually.

The Head of Service and Finance Manager both have the delegated authority to use reserves for specific projects up to the value of £30k, although anything over the value of £50k would have to be approved at the Resources Management meeting and anything over £150k would require Authority committee sign off.

OVERALL CONCLUSIONS

There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited. Our overall opinion of the controls within the system at the time of the audit was that they provided Reasonable Assurance.

1 There is no policy on the use of reserves

Moderate**Control weakness**

The Authority does not have a reserves policy in place.

What is the risk?

Reserve levels are not managed appropriately potentially affecting the financial sustainability of the Authority.

Findings

Local Authorities are required to follow certain regulations and accounting standards when managing their finances, including how they hold and use reserves. Under the Local Government Act 2003, the Chief Finance Officer (CFO) must report on the adequacy of reserves as part of the budget-setting process. There is currently no reserves policy for the Authority. A reserves policy is crucial for the Authority in order to provide a structured approach to managing the financial resources necessary to ensure financial stability, support service delivery, and mitigate risks. We did find that there is a section in the budget report confirming that general reserves have been reviewed and exceed the minimum threshold of £260k for the 2024/25 financial year. However, there is no longer term strategy in place for the use of reserves or the levels required.

Agreed action

The Authority will implement a reserves usage policy to be circulated to Senior Management and Budget Managers to provide greater control around expenditure and to ensure the Authority have enough operational reserves to deliver services & contingency to deal with the unexpected. In addition to a new policy, we will restructure our reserves to enable our future financial stability.

Responsible officer: Finance Manager**Timescale: 30 September 2025**

2 Reserve levels are not regularly reviewed or assessed for adequacy

Moderate

Control weakness

The adequacy of some specific department reserve levels are not reviewed

What is the risk?

Reserve levels are insufficient to cover unexpected events resulting in financial challenges, or reserve levels are too high resulting in unnecessary service reductions.

Findings

Reserve levels and any potential use of reserves is discussed with the Finance Manager as part of the mid-year review and year end process with budget holders. However, we found that there were no formal processes for determining or reviewing the adequacy of the reserve levels. There is no formal process within the service area and no corporate guidance on what reserve levels should be. The level of the VAT reserve for example is not linked to the projected partial exemption repayment that may be required. However, mitigation processes are in place to ensure the Authority are not in breach of the partial exemption VAT rules and meetings with the HOS and Asset Manager take place regularly to review strategic options. The ICT reserve is reviewed alongside the insurance renewal for disaster recovery, but there are no working papers or supporting documentation for this. However, the ICT reserve was topped up in 2024/25 due to wider service surpluses. The process is informal. It is the same for the Corporate Property Reserve, as the costs are based on judgements by the service area on potential costs.

It is a standard process at year end to request additional funds for reserves on the year end forms which are submitted to the Finance Manager. The Finance Manager then allocates any surplus budget to reserves.

We also found that there was no link between the reserve levels and the risk register in terms of the likelihood and impact.

Agreed action

As part of the implementation of the new Reserves policy, the management of all reserves will sit with Finance. This will allow the allocation of reserves to be earmarked to areas that support the ongoing operation of the Authority, align with

our strategic direction and help mitigate any future risks. This will also remove the restriction on utilising departmental reserves and allow us invest reserves for futureproofing the Authority.

Responsible officer: Finance Manager

Timescale: 30 September 2025

Audit opinions

Audit work is based on sampling transactions to test the operation of systems. It cannot guarantee the elimination of fraud or error. Our opinion is based on the risks we identify at the time of the audit. Our overall audit opinion is based on four grades of opinion, as set out below.

Opinion	Assessment of internal control
Substantial assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

Finding ratings

Critical	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Significant	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Moderate	The system objectives are not exposed to significant risk, but the issue merits attention by management.
Opportunity	There is an opportunity for improvement in efficiency or outcomes but the system objectives are not exposed to risk.

Where information resulting from audit work is made public or is provided to a third party by the client or by Veritau then this must be done on the understanding that any third party will rely on the information at its own risk. Veritau will not owe a duty of care or assume any responsibility towards anyone other than the client in relation to the information supplied. Equally, no third party may assert any rights or bring any claims against Veritau in connection with the information. Where information is provided to a named third party, the third party will keep the information confidential.

INTERNAL AUDIT 2024/25 ANNUAL REPORT

1. Purpose

- 1.1 To provide a summary of the Internal Audit work performed in 2024/25 and to express an opinion on the overall framework of governance, risk management and controls in place at the Authority.
- 1.2 To inform Members of the changes to the internal audit standards which came into effect on 1st April 2025.
- 1.3 To present an updated Internal Audit Charter, which reflects the new internal audit standards, for the Authority to approve.
- 1.4 Thomas Absalom, Internal Audit Manager – Audit Assurance, Veritau, will be present at the meeting and available to answer any Members questions.

2. Context

- 2.1 The work of internal audit is governed by the Accounts and Audit Regulations 2015, relevant professional standards, and the Authority's Internal Audit Charter. Up until the end of 2024/25, these standards included the Public Sector Internal Audit Standards (PSIAS), CIPFA guidance on the application of those standards in Local Government, and the CIPFA Statement on the role of the Head of Internal Audit.
- 2.2 These standards require the Head of Internal Audit to present an annual report to the Authority. The report must include an opinion on the adequacy and effectiveness of the Authority's framework of governance, risk management, and control. The Authority received an overall opinion of **Substantial Assurance** for 2024/25. The full report can be found at Appendix 1.
- 2.3 The Head of Internal Audit should also contribute to the preparation of the Annual Governance Statement by identifying any significant control issues identified during audit work.
- 2.4 With effect from 1 April 2025, PSIAS were replaced by what is known as the Global Internal Audit Standards in the UK Public Sector. This new regime is made up of the Institute of Internal Auditors' Global Internal Audit Standards (GIAS), including Topical Requirements, and the Application Note: Global Internal Audit Standards in the UK Public Sector (the Application Note').
- 2.5 CIPFA has also produced a 'Code of Practice for the Governance of Internal Audit in UK Local Government' ('the Code'). The purpose of the Code is to ensure that the essential conditions for the governance of internal audit can be met in a local government context. The Code is intended for local authorities, being designed to support them in establishing effective internal audit arrangements and in providing oversight and support for internal audit.

- 2.6 The Internal Audit Charter is a key document governing the Authority's internal audit function. In drafting the updated Charter, the requirements and expectations of the GIAS, Application Note, and the Code have been considered and applied.

3. Proposals

- 3.1 Members are asked to consider the Internal Audit Annual Report for 2024-25. The report contains the Head of Internal Audit's overall assurance opinion, and a summary of the key findings in each area audited during the year. This can found at Appendix 1.
- 3.2 Members are asked to note the outcome of the quality assurance and development arrangements and confirmation that the internal audit service conforms to relevant professional standards. The full report is available in Appendix 2.
- 3.3 Members are asked to approve the updated Internal Audit Charter. Professional standards for internal audit require that the Head of Internal Audit develops and maintains an internal audit charter. An internal audit charter addresses the purpose, scope, positioning, and authority of internal audit, the support it can expect to receive from senior management, its interactions with the committee, its commitment to adhering to professional standards, and the arrangements for managing resources and quality.
- 3.4 The changes to the internal audit standards have required Veritau to update the Authority's Internal Audit Charter. The Authority already has well-established arrangements for internal audit and so only limited changes to the Charter have been necessary. References to PSIAS have been removed and replaced with the Global Internal Audit Standards in the UK Public Sector. Some minor structural and formatting changes have also been made.
- 3.5 The updates made to the Charter will result in no change to how the internal audit service is delivered to the Authority. The Internal Audit Charter is attached at Appendix 3.

4. Recommendations

- 4.1 To consider and note the Internal Audit Annual Report for 2024/25 from the Internal Auditors at Appendix 1.**
- 4.2 To consider and note the quality assurance and development arrangements and the confirmation that the internal audit service conforms to relevant professional standards at Appendix 2.**
- 4.3 To approve the updated Internal Audit Charter at Appendix 3.**

5. Corporate Implications

a. Legal

Pursuant to Regulation 5 of the Accounts and Audit Regulations 2015, the Authority, as a relevant authority defined in paragraph 2, Schedule 2 of the Local Audit and Accountability Act 2014, must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.

b. Financial

The cost of the Internal Audit is allocated from the Finance Budget. The annual cost of the Internal Audit service is £14,350 and the Authority has just entered a 3-year contract, with the annual price being fixed over the term.

c. National Park Management Plan and Authority Plan

The Authority Plan includes Objective F (Governance) - to have best practice governance arrangements in place.

d. Risk Management

The Internal Audit process is regarded as an important part of the overall internal controls operated by the Authority. Our Internal Auditors provide independent assurance that internal controls are functioning as intended. They will report significant risks back to management and offer recommendations to combat such risks.

e. Net Zero

With the exception of attendance at Authority meetings where required, all meetings with Internal Auditors are held virtually, reducing the associated emissions caused by business travel.

6. Background papers (not previously published)

None.

7. Appendices

Appendix 1: Internal Audit Annual Report 2024/25

Report Author and Responsible Officer, Job Title and Publication Date

Author: Sinead Butler, Finance Manager & Chief Financial Officer. Responsible Officer: Emily Fox, Head of Resources 17/06/2025

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HEAD OF INTERNAL AUDIT ANNUAL REPORT 2024/25

11 July 2025

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2	Background
2	Internal audit work carried out in 2024/25
2	Follow up of agreed actions
3	Professional standards
4	Opinion of the Head of Internal Audit
5	Appendix A - 2024/25 internal audit work
6	Appendix B – Audit opinions and priorities for findings
7	Appendix C – Internal Audit Quality Assurance and Development Activities



Thom Absalom
Audit Manager



Stuart Cutts
Head of Internal Audit

Circulation list: Members of the National Park Authority



Background

- 1 The work of internal audit in 2024/25 was governed by the Public Sector Internal Audit Standards (PSIAS)¹ and the Authority's audit charter. These require the Head of Internal Audit to bring an annual report to the Authority. The report must include an opinion on the adequacy and effectiveness of the Authority's framework of governance, risk management and control. The report should also include:
 - (a) any qualifications to the opinion, together with the reasons for those qualifications (including any impairment to independence or objectivity)
 - (b) any particular control weakness judged to be relevant to the preparation of the annual governance statement
 - (c) a summary of work undertaken to support the opinion, including any reliance placed on the work of other assurance bodies
 - (d) an overall summary of internal audit performance and the results of the internal audit service's quality assurance and improvement programme, including a statement on conformance with the PSIAS.



Internal audit work carried out in 2024/25

- 2 During 2024/25, internal audit work was carried out across a range of areas of the Authority as agreed by the Authority on 26 July 2024. All planned work has been completed.
- 3 Appendix A provides further information on the internal audit work carried out during the year and the opinion given for each report. Full internal audit reports for each audit have been provided to members; three to the February 2025 Authority meeting, and three to this meeting, in July 2025.
- 4 Appendix B provides an explanation of our assurance levels and priorities for audit findings. In 2024/25, we updated our rating system for audit findings and actions. Previously, actions were rated on a 1 (highest) – 3 (lowest) scale in terms of risk. These are now rated on a scale of 'critical', 'significant' and 'moderate'. These ratings reflect the severity of the issue identified and the agreed actions then inherit the rating of the finding to which they are attached. We have also introduced a new 'opportunity' rating for findings where the issue does not represent a risk to the organisation, but there is an opportunity to improve processes or outcomes.



Follow up of agreed audit actions

- 5 All actions agreed with services as a result of internal audit work are followed up to ensure that issues are addressed. As a result of this work, we are satisfied that sufficient progress has been made to address the control weaknesses identified in previous audits.

¹ The Global Internal Audit Standards (UK Public Sector) apply from 1 April 2025. Further information on the new standards is included from paragraphs 10 onwards in this report.



Professional standards

- 6 In order to comply with professional standards, the Head of Internal Audit is required to develop and maintain ongoing quality assurance arrangements. The objective of these arrangements is to ensure that working practices continue to conform with the standards. A summary of quality assurance processes and any areas identified for development are reported to the committee each year as part of the annual report. The arrangements consist of various elements, including:
 - ▲ maintenance of a detailed audit procedures manual and standard operating practices
 - ▲ ongoing performance monitoring of internal audit activity
 - ▲ regular customer feedback
 - ▲ training plans and associated training and development activities
 - ▲ periodic self-assessments of internal audit working practices (to evaluate conformance to the standards)
- 7 External assessments must be conducted at least once every five years by a qualified, independent assessor or assessment team from outside the organisation. An external assessment of Veritau's internal audit working practices was undertaken between June and August 2023 by John Chesshire, an approved reviewer for the Chartered Institute of Internal Auditors (the UK and Ireland's local chapter).
- 8 The assessment involved a full independent validation of Veritau's own self-assessment of conformance to the Public Sector Internal Audit Standards (PSIAS), as well as to the wider International Professional Practices Framework which governed the performance of internal auditing globally at the time the assessment was undertaken. The report concluded that Veritau's internal audit activity generally conforms to the PSIAS² and, overall, the findings were very positive.
- 9 The feedback included comments that the internal audit service was highly valued by its clients. Key stakeholders felt confident in the way Veritau had established effective working relations, both in our approach to planning and the way in which we engage flexibly with our clients throughout the internal audit process, at the strategic and operational levels.
- 10 From 1 April 2025, the PSIAS were replaced by what are known as the Global Internal Audit Standards in the UK Public Sector. These standards are made up of the Institute of Internal Auditors' Global Internal Audit Standards (GIAS) and the Application Note: Global Internal Audit Standards in the UK Public Sector ('the Application Note'). The Application Note interprets the GIAS, clarifying how they should be applied in UK public sector organisations.

² PSIAS guidance suggests a scale of three ratings, 'generally conforms', 'partially conforms' and 'does not conform'. 'Generally conforms' is the top rating.

- 11 In the UK, the body responsible for interpreting the GIAS and setting expectations for the performance of internal audit in the public sector is known as the Internal Audit Standards Advisory Board (IASAB). The IASAB is made up of six 'Relevant Internal Audit Standard Setters' (RIASS) representing central and local government, and the health sector. The RIASS for UK local government is the Chartered Institute of Public Finance and Accountancy (CIPFA). The IASAB developed the Application Note, releasing it in the early part of 2025.
- 12 The Global Internal Audit Standards (from which the Application Note provides its local government interpretations) were launched on 9 January 2024 and became effective on 9 January 2025. Veritau has used a GIAS conformance readiness tool provided by the IIA, alongside the specific public sector interpretations and requirements of the Application Note to prepare for the introduction of the new standards.
- 13 Our overall assessment is that Veritau conforms to the Global Internal Audit Standards in the UK Public Sector. However, we have identified a small number of actions to help strengthen our ability to demonstrate conformance. In addition, we have identified a further set of actions to continuously improve service delivery.
- 14 Details of Veritau's ongoing quality assurance arrangements and the outcomes from our conformance assessment are set out in appendix C.
- 15 The Internal Audit Charter sets out how internal audit at the Authority will be provided in accordance with professional standards. The charter is reviewed periodically. Updates to the charter have been made to ensure that it meets the requirements of the Global Internal Audit Standards in the UK Public Sector. The Authority already has a well-established internal audit service and so very few changes have been made to the charter. Those changes which have been made will have no impact on how the service is delivered. An updated charter is contained as a separate document accompanying this report.



Opinion of the Head of Internal Audit

- 16 The overall opinion of the Head of Internal Audit on the framework of governance, risk management and control operating in the Authority is that it provides **Substantial Assurance**. No reliance was placed on the work of other assurance providers in reaching this opinion, and there are no significant control weaknesses which, in the opinion of the Head of Internal Audit, need to be considered for inclusion in the Annual Governance Statement.
- 17 The opinion given is based on work that has been undertaken directly by internal audit, and on cumulative knowledge gained through our ongoing liaison and planning with officers.

Appendix A: Internal audit work in 2024/25

Final reports issued

Audit	Status	Opinion
Budget setting, monitoring and reporting	Completed	Reasonable assurance
Income (Farming in Protected Landscapes and Peak District National Park Foundation)	Completed	Substantial assurance
Moors for the Future	Completed	Substantial assurance
Rent reviews, leases and concessions	Completed	Reasonable assurance
Reserves	Completed	Reasonable assurance
Volunteering	Completed	Substantial assurance

Appendix B: Audit opinions and priorities for actions

Audit opinions

Audit work is based on sampling transactions to test the operation of systems. It cannot guarantee the elimination of fraud or error. Our opinion is based on the risks we identify at the time of the audit. Our overall audit opinion is based on four grades of opinion, as set out below.

Opinion	Assessment of internal control
Substantial assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
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Limited assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.
Finding ratings	
Critical	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Significant	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Moderate	The system objectives are not exposed to significant risk, but the issue merits attention by management.
Opportunity	There is an opportunity for improvement in efficiency or outcomes but the system objectives are not exposed to risk.

Appendix C: Internal Audit Quality Assurance and Development Arrangements

1.0 Background

Ongoing quality assurance arrangements

Veritau maintains appropriate ongoing quality assurance arrangements designed to ensure that internal audit work is undertaken in accordance with relevant professional standards. From April 2025 those standards are the Global Internal Audit Standards in the UK Public Sector. Quality assurance arrangements include:

- ▲ the maintenance of a detailed audit procedures manual
- ▲ the requirement for all audit staff to conform to a Code of Ethics and Standards of Conduct Policy
- ▲ the requirement for all audit staff to complete annual declarations of interest
- ▲ detailed job descriptions and competency profiles for each internal audit post
- ▲ regular operational 121 meetings for all auditors, to review progress with audit engagements, and formal 121s that include discussion of overall performance
- ▲ induction programmes, training plans and associated training activities
- ▲ attendance on relevant courses and access to e-learning material
- ▲ the maintenance of training records and training evaluation procedures
- ▲ membership of professional networks
- ▲ agreement of the objectives, scope and expected timescales for each audit engagement with the client before detailed work commences (audit specification)
- ▲ the results of all audit testing and other associated work documented in a structured format using our audit management system – K10 Vision
- ▲ file review by senior auditors and audit managers and sign-off at each stage of the audit process
- ▲ the ongoing investment in tools to support the effective performance of internal audit work (for example data interrogation software)
- ▲ post audit questionnaires (customer satisfaction surveys) issued following each audit engagement
- ▲ regular client liaison meetings to discuss progress, share information and evaluate performance.

On an ongoing basis, completed audit work is subject to internal peer review by a Quality Assurance group. The review process is designed to ensure audit work is completed consistently and to the required quality standards. The work of the Quality Assurance group is overseen by an Assistant Director. Any key learning points are shared with the relevant internal auditors and audit managers. The

Head of Internal Audit will also be informed of any general areas requiring improvement. Appropriate mitigating action will be taken where required (for example, increased supervision of individual internal auditors or further training).

Annual self-assessment

On an annual basis, the Head of Internal Audit will seek feedback from each client on the quality of the overall internal audit service. This includes surveys targeted at senior officers and chairs of audit committees. The Head of Internal Audit also undertakes an annual self-assessment against internal audit standards. A hybrid approach to self-assessment has been taken this year, as a result of the change in the internal audit standards regime from April 2025. Further information about this year's approach is set out below. As part of ongoing performance management arrangements, managers and auditors assess current skills and knowledge against the competency profiles for internal audit roles. Where necessary, further training or support will be provided to address any development needs.

The Head of Internal Audit and other members of the internal audit management team also participate in various professional networks and obtain information on operating arrangements and relevant best practice from other similar audit providers for comparison purposes.

The results of annual client surveys, self-assessment against the standards, professional networking, and ongoing quality assurance and performance management arrangements are used to identify any areas requiring further development or improvement. Actions required are reflected in Veritau business plans, the Veritau internal audit strategy, and individual personal development plans as appropriate. Any specific changes needed to address conformance with professional standards are reported to the Audit and Governance Committee as part of the annual report of the Head of Internal Audit. The report also summarises other development activity planned to enhance the delivery of the service. Information gathered for quality assurance and development purposes is also used to evaluate overall conformance with internal audit standards.

External assessment

At least once every five years, arrangements must be made to subject internal audit working practices to external assessment to ensure the continued application of professional standards. The assessment should be conducted by an independent and suitably qualified person or organisation and the results reported to the Head of Internal Audit. The outcome of the external assessment also forms part of the overall reporting process to each client. Any specific areas identified as requiring further development and/or improvement will be incorporated into current development plans.

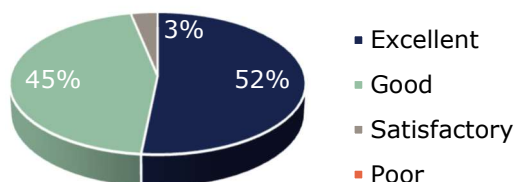
2.0 Customer satisfaction survey 2025

In March 2025 we asked clients for feedback on the overall quality of the internal audit service provided by Veritau during the preceding year. Where relevant, the

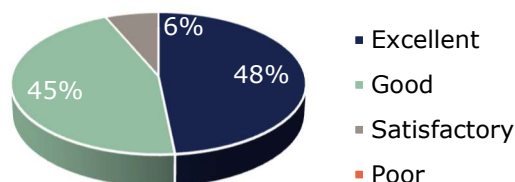
survey also asked questions about counter fraud and information governance services. A total of 188 surveys (2024 – 173) were issued to senior managers in client organisations. A total of 32 responses were received representing a response rate of 17% (2024 – 10%). Respondents were asked to rate the different elements of the audit process as either excellent, good, satisfactory or poor.

Respondents were also asked to provide an overall rating for the service. The results of the survey are set out in the charts below. These are presented as percentages, for consistency with previous years. However, it is recognised that the relatively low number of respondents means that the percentage for each category is sensitive to small changes in actual responses (1 respondent represents about 3%).

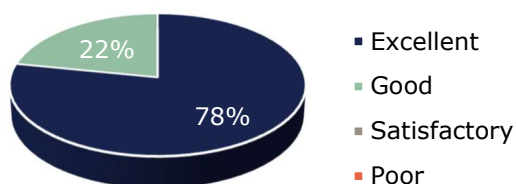
Quality of audit planning / coverage



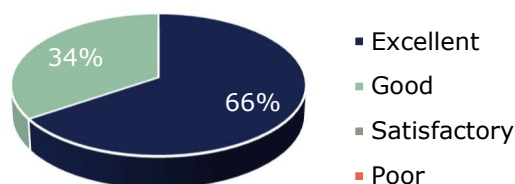
Provision of advice / guidance



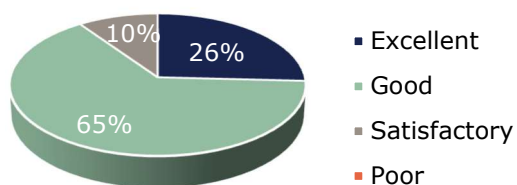
Staff conduct & professionalism



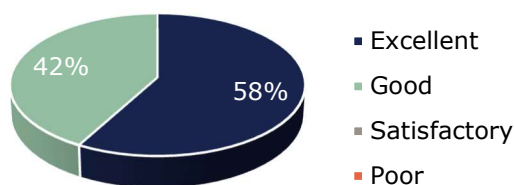
Ability to establish positive rapport



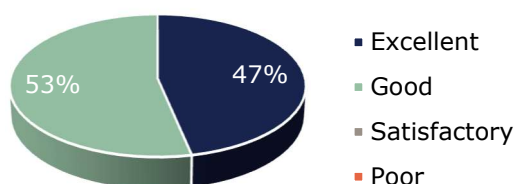
Knowledge of area being audited



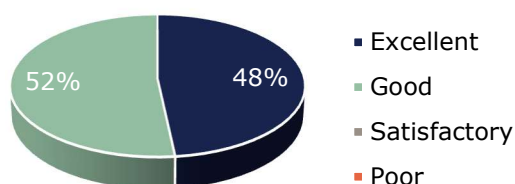
Minimising disruption for area being audited



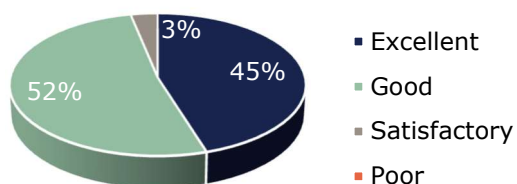
Communication of issues during audit



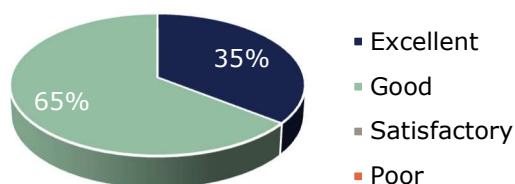
Quality of feedback at end of audit



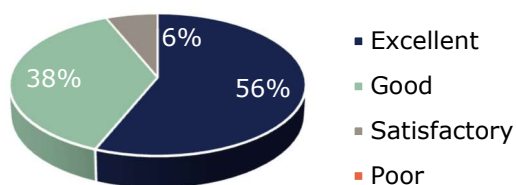
Accuracy / format / length / style of report



Relevance of audit opinions & conclusions



Overall rating for the Internal Audit service



The overall ratings in 2025 were:

	2025		2024	
Excellent	18	56%	7	44%
Good	12	38%	8	50%
Satisfactory	2	6%	1	6%
Poor	0	0%	0	0%

The feedback shows that the majority of respondents continue to value the service being delivered.

3.0 Self-assessment against audit standards 2025

The Accounts and Audit Regulations 2015 require internal auditors working in local government to take into account public sector internal auditing standards or guidance. Up to 31 March 2025, the relevant standards were the Public Sector Internal Audit Standards (PSIAS). CIPFA (who are responsible for setting internal audit standards for local government) have adopted new standards that apply from 1 April 2025. These are the Global Internal Audit Standards in the UK Public Sector – or GIAS (UK Public Sector)³. Internal auditors working in local government are expected to apply the new standards from April 2025.

In previous years Veritau has used a checklist published by CIPFA to assess conformance with the PSIAS. This is no longer appropriate following the change in standards. However, no equivalent checklist for assessment against the new standards has yet been published. For the self-assessment undertaken in April 2025, we have used documentation published by the Institute of Internal Auditors to prepare for the introduction of the new standards. This highlights areas of the GIAS that are changing and where updates to current arrangements may need to be made. We have also considered any changes required by the introduction of the new Application Note. We intend to undertake a further full assessment against the new standards later in 2025/26, once further guidance on assessing conformance is available.

³ The GIAS (UK Public Sector) comprises the Institute of Internal Auditors' Global Internal Audit Standards (GIAS) and the Internal Audit Standards Advisory Board's Application Note: Global Internal Audit Standards in the UK Public Sector (referred to as the Application Note). The Application Note interprets the GIAS for the UK public sector.

The self-assessment has identified two actions required to address areas of partial conformance with the standards. These are:

- ▲ To update current internal audit charters to address various requirements of the new standards. For example, the need to set out the internal audit mandate and to clarify the roles of senior managers and the audit committee in championing the role of internal audit.
- ▲ To introduce a new survey of chairs of audit committees (or equivalent) to address requirements for the committees to provide input on internal audit performance.

A new charter has been prepared and is included as part of the agenda for the current committee, for approval.

We received and reviewed the results from the survey of chairs of audit committees in late May 2025. A 50% response rate was achieved and Veritau received ratings of either excellent or good for all nine questions asked. Responses were particularly complimentary about Veritau's professionalism, timeliness of responses, the coverage of our work, and the relevance of our annual opinions. No specific development and improvement actions have been identified from the survey. However, we will continue to run it annually.

The self-assessment has highlighted a number of other actions that are not required to comply with the standards – but which will help to improve the service. These will be taken forward as part of our existing internal audit strategy. Further information on development activity is included below.

4.0 External Assessment

As noted above, the PSIAS required the Head of Internal Audit to arrange for an external assessment to be conducted at least once every five years to ensure the continued application of professional standards. This requirement continues under the GIAS (UK Public Sector). The assessment is intended to provide an independent and objective opinion on the quality of internal audit practices.

An external assessment of Veritau's internal audit working practices was undertaken in summer 2023, by John Chesshire, an approved reviewer for the Chartered Institute of Internal Auditors. The report concluded that Veritau internal audit activity 'generally conforms' to the PSIAS⁴ and, overall, the findings of the review were very positive. The feedback included comments that the internal audit service was highly valued by its member councils. Key stakeholders felt confident in the way Veritau had established effective working relations, both in our approach to planning, and the way we engage flexibly with our clients throughout the internal audit process, at both strategic and operational levels.

The outcomes from the external assessment were reported to this committee on 8 November 2023. The assessment was based on the PSIAS. Many of the

⁴ PSIAS guidance suggests a scale of three ratings, 'generally conforms', 'partially conforms' and 'does not conform'. 'Generally conforms' is the top rating.

requirements under the new standards are the same or similar, and we can therefore continue to place reliance on the previous report. However, a further external assessment against the new standards will need to be carried out in the next three years.

5.0 Development plans

Overall, the internal audit services provided by Veritau continue to meet the requirements of professional standards. However, we recognise that the pace of change in local government and the wider public sector mean that there is a need to continually review and update aspects of our service to ensure it stays up to date and continues to deliver good value.

We first introduced an internal audit strategy in 2021. The strategy identified priorities for developing the service and actions to deliver continuous improvement. As a result of that we have changed many aspects of the service in the last four years. Key successes include:

- ▲ audit planning – we have become better at defining the areas we need to focus on (including client-specific risks and objectives) and we've introduced new arrangements for capturing and assessing information on our clients' operations
- ▲ work planning – introducing flexible arrangements that help us focus upcoming audits on areas that are most important and allow us to change course quickly when priorities change
- ▲ reporting – ensuring that key information is available to clients to understand audit priorities and outcomes
- ▲ implementation of a new audit management system (K10) – the new system uses the latest technology, offers improved functionality, and is supporting development activity across a range of areas.

We have also tried a few things which did not deliver the expected outcomes. However, we have used the experience gained to improve core audit activities and ways of working.

The latest strategy (2025 to 2027) was adopted in January 2025. It sets out areas we are prioritising for development over the next three years. These include the following:

- ▲ focussing on the development of high value assurance techniques and expertise. For example, the use of data analytics to provide increased understanding of clients' operations and the use of artificial intelligence tools to increase efficiency and insights. Developing our knowledge of opportunities and risks associated with AI will also help us to support client adoption of new technologies.
- ▲ further development of systems for planning, prioritising and reporting audit work to ensure work is targeted to the areas of highest importance for our clients, our internal processes are as efficient as they can be, and the clarity and usefulness of reports is maximised.

- ▲ use of the new K10 audit system to improve functionality for the delivery of audit work and the production of management information. We want to use the system to streamline follow up activity, and further develop internal management processes. This will help us to better understand and manage audit workflows, improve service delivery, and inform performance management arrangements.

To achieve these priorities, we have focused actions in the following key areas:

- ▲ embedding a strategic approach to work programme development and the use of the audit opinion framework
- ▲ redesigning and modernising our audit working practices (including assignment planning and reporting)
- ▲ further developing our use of data analytics
- ▲ developing our key performance indicators and the measures of added value

Quality assurance group

The internal audit quality assurance group has recently reported on their 2024/25 activities. They were aiming to assess how well core audit practices had been adopted and applied using the new K10 system by looking at a sample of completed audit files. They found that overall, core working practices had translated well to the new system. Strengths included the following:

- ▲ the completeness of files and file review processes – information expected to be on file was included and files had been signed off by relevant supervisors.
- ▲ good documentation of engagement with officers when planning individual audits and agreement of the scope and objectives of work.
- ▲ good use of new system functionality to record the systems audited and linked to this, the tests to be undertaken.
- ▲ assignment of the priorities to issues found and overall opinions were in line with expectations, and key findings were well documented.

A few areas requiring improvement were found. These included:

- ▲ the need to better document the analysis and conclusions reached during the planning stage of each audit, and discussions with clients at the end of each audit
- ▲ improvements needed to cross referencing documents within the system between related pieces of work – this may require a review of current system set up and training
- ▲ a need to better document conclusions directly within K10, to increase the efficiency of report generation from the system.

These issues have been flagged for further action through system development, whole team training and feedback to individual auditors where required.

Improvement actions identified during self-assessment

As noted above, we have identified a number of areas for improvement while undertaking the annual self-assessment. These do not represent non-conformance with standards but will help us to improve the service. Continuous improvement actions identified included the following:

- ▲ review existing auditor competency profiles to ensure adequate coverage of the auditor competencies identified in the GIAS
- ▲ strengthen the analysis of outcomes from routine training delivered, to ensure it met objectives and any further action or training required was identified
- ▲ undertake additional training for auditors on professional scepticism
- ▲ ensure routine training delivered clearly highlights links to the relevant professional standards being covered
- ▲ review coverage of value for money considerations in the audit manual, and ensure adequate coverage in routine training
- ▲ review the presentation of annual conclusions to assess whether different approaches could present clearer insights

These actions will be integrated into the internal audit strategy action plan.

6.0 Overall conformance with standards

Based on the overall outcomes from quality assurance and development planning arrangements, the Head of Internal Audit considers that the internal audit service conforms to Global Internal Audit Standards in the UK Public Sector.

Code of Practice for the Governance of Internal Audit in UK Local Government

The Global Internal Audit Standards

Since 1 April 2025, Veritau has been working to new globally applicable standards for the performance of internal auditing. These standards, known as the Global Internal Audit Standards (GIAS) replace the International Standards for the Professional Practice of Internal Auditing which had been in place for over a decade.

The new standards are described by the Institute of Internal Auditors as an evolution rather than a revolution. Over the last 12 months, Veritau has been preparing for the standards by evaluating our current arrangements and processes against the requirements of the GIAS.

Structurally, the GIAS are organised into five 'domains' which collectively represent the purpose, positioning, and performance of internal audit (figure 1). Within each domain are a set of principles (15 in total) which guide the professional practice of internal auditing. Each principle is, in turn, supported by standards (52 in total) that contain requirements, considerations for implementation, and examples of evidence of conformance.

Figure 1: the five GIAS domains



Applying the Global Internal Audit Standards to the UK public sector

Given that internal audit is performed in many different jurisdictions and contexts globally, the GIAS recognise that requirements will need to be adapted for each country and sector (with internal auditing in the public sector being specifically referenced for the

first time). These are broadly known as 'interpretations' to the GIAS and are permitted so long as the original intention of the standard is met.

In the UK, the body responsible for interpreting the GIAS and setting expectations for the performance of internal audit in the public sector is known as the Internal Audit Standards Advisory Board (IASAB). The IASAB is made up of six 'Relevant Internal Audit Standard Setters' (RIASS) representing central and local government, and the health sector. The RIASS for UK local government is the Chartered Institute of Public Finance and Accountancy (CIPFA).

Application Note: Global Internal Audit Standards in the UK Public Sector

It was IASAB which produced the Public Sector Internal Audit Standards (PSIAS). With the introduction of the GIAS, the PSIAS no longer exist. The PSIAS have now been replaced by a new compliance regime known as the Global Internal Audit Standards in the UK Public Sector or 'GIAS UK Public Sector'.

GIAS UK Public Sector is made up of the Global Internal Audit Standards (as well as what are known as 'Topical Requirements') and the 'Application Note: Global Internal Audit Standards in the UK Public Sector' ('the Application Note').

The purpose of the application note, issued by the RIASS in December 2024, is to set out interpretations and requirements which need to be applied to the GIAS requirements so that these form a suitable basis for internal audit practice in the UK public sector. It sets out eight specific interpretations to the GIAS and, importantly for this briefing note, advises that the RIASS for each sector may choose to issue specific guidance for the governance of internal audit.

Code of Practice for the Governance of Internal Audit in UK Local Government

Background and purpose

CIPFA has recently published the 'Code of Practice for the Governance of Internal Audit in UK Local Government' ('the Code'). As noted above, the purpose of the Code is to ensure that the essential conditions of governance can be met in a local government context.

However, a difference between the GIAS UK Public Sector and the Code is that the Code is intended for local authorities themselves rather than internal audit functions. It is designed to support authorities in establishing effective internal audit arrangements and providing oversight and support for internal audit.

Internal audit functions are still expected to be aware of the Code, and to assess compliance with it (alongside GIAS UK Public Sector), but the emphasis of the Code is on ensuring that local authorities have created the conditions for internal audit to be delivered effectively.

The Code builds on existing CIPFA guidance, including:

- ▲ Position Statement: audit committees in local authorities and police (2022)
- ▲ The role of the head of internal audit (2019) (the Code replaces the organisational responsibilities)

▲ The Financial Management Code (2019).

Much of the Code is already recognised good practice, and CIPFA's expectation is that many authorities will already have most of these arrangements in place. Bringing them together into a Code aims to strengthen the position of internal audit in local government and to support its professionalism. Strengthening governance arrangements is intended to ensure authorities are better able to meet their challenging service priorities and make best use of their resources.

Demonstrating compliance

CIPFA has established the Code as part of the proper practice requirements under the Accounts and Audit Regulations 2015. It introduces a requirement for local authorities to explain how they comply with the Code in their annual governance statements (guidance on which is currently being updated through an addendum to the CIPFA / SOLACE good governance framework). It is therefore important for authorities to understand the Code, and to engage early with it before preparing their 2025/26 statements.

The Code itself is organised into three main sections which are designed to help authorities ensure that they meet the essential conditions for governance set out in domain III of the GIAS. These sections are:

- ▲ Providing the authority for internal audit
- ▲ Positioning internal audit independently
- ▲ Oversight of internal audit

Taken together, the requirements address the purpose, scope, positioning, and authority of internal audit, the support it can expect to receive from senior management, interactions with the audit committee, and arrangements for managing resources and quality.

Assessing compliance: the compliance checklist

To support our clients in interpreting and assessing compliance with the Code, Veritau has created a bespoke compliance checklist. The checklist draws out each of the Code's requirements, indicates whether the authority or Veritau is primarily responsible, and includes relevant considerations and actions (where required).

It is for each authority to satisfy itself that the governance arrangements in place meet the requirements of the Code. It is also for each authority to determine how or if it wishes to engage members of the audit committee (or equivalent) in the compliance assessment process, and how to raise the profile of the Code amongst committee members and senior management. Future Veritau reports to committee will reference the Code, alongside the newly introduced GIAS UK Public Sector. We will also be available to support each authority's compliance efforts.

The need for action will vary by client since it will depend on the current governance arrangements for internal audit. However, all clients will be required to review and approve an updated internal audit charter over the coming weeks. The internal audit charter, and the arrangements it sets out, is fundamental to achieving compliance with the Code. Client officers / senior management should therefore make sure that the charter has been reviewed, and that the arrangements included are operating in practice, before it is presented to the audit committee (or equivalent) for approval.

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Peak District National Park Authority Internal Audit Charter

June 2025 (draft)

1 Purpose and commitment to professional standards

- 1.1 The purpose of the internal audit service is to strengthen Peak District National Park Authority's ability to create, protect, and sustain value by providing the Audit Committee¹ and senior management with independent, risk-based, and objective assurance, advice, insight, and foresight.
- 1.2 The internal audit service enhances Peak District National Park Authority's:
- successful achievement of its objectives
 - governance, risk management, and control processes
 - decision-making and oversight
 - reputation and credibility with its stakeholders
 - ability to serve the public interest.
- 1.3 Peak District National Park Authority's internal audit service is most effective when:
- Internal auditing is performed by competent professionals in conformance with The Institute of Internal Auditors' Global Internal Audit Standards (UK public sector).
 - The internal audit service is independently positioned, with direct accountability to the Audit Committee.
 - Internal auditors are free from undue influence and committed to making objective assessments.
- 1.4 Peak District National Park Authority can expect to see its internal audit service demonstrate integrity, competence, and due professional care, align with its strategies, objectives, and risks, demonstrate quality and continuous improvement, be insightful, proactive, and future-focused, communicate effectively, and contribute to organisational improvement.
- 1.5 Peak District National Park Authority's internal audit service will adhere to the mandatory elements of The Institute of Internal Auditors' International Professional Practices Framework, which are the Global Internal Audit Standards in the UK Public Sector and Topical Requirements. The chief audit executive will report annually to the Audit Committee and senior management regarding the internal audit service's conformance with the standards, which will be assessed through a quality assurance and improvement programme.

2 The internal audit mandate

- 2.1 There is a statutory duty on the authority to undertake an internal audit of the effectiveness of its risk management, control and governance processes. The Accounts and Audit Regulations 2015 also require that the audit takes into account public sector internal auditing standards or guidance. The Chartered Institute of

¹ The functions of the Audit Committee are being currently being carried out by the National Park Authority but under review in 2025/26.

Public Finance and Accountancy (CIPFA) is responsible for setting standards for proper practice for local government internal audit.

- 2.2 CIPFA has determined that the Global Internal Audit Standards are a suitable basis for the practice of internal auditing in UK local government, subject to interpretations and requirements set out in its application note². Taken together, the Global Internal Audit Standards and the application note represent proper practice for internal audit in local government. This charter sets out how internal audit at Peak District National Park Authority will be provided in accordance with this proper practice.
- 2.3 The charter should be read in the context of the wider legal and policy framework which sets requirements and standards for internal audit, including the Accounts and Audit Regulations, the application note, the code of practice³, and the authority's constitution, regulations and governance arrangements.

3 Definitions

- 3.1 The Global Internal Audit Standards define internal auditing as follows:

"Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes."

- 3.2 The Global Internal Audit Standards include reference to the roles and responsibilities of the "board" and "senior management" in relation to the governance of internal audit. Each organisation is required to define these terms in the context of its own governance arrangements. For the purposes of the Global Internal Audit Standards in the UK Public Sector (hereon in referred to as the "GIAS (UK public sector)") these terms are defined as follows at Peak District National Park Authority.

"Board" – the National Park Authority fulfils the responsibilities of the board in relation to internal audit standards and activities. References in the charter to the Audit Committee relate to the National Park Authority.

"Senior management" – in the majority of cases, the term senior management in the GIAS (UK public sector) should be taken to refer to the Chief Financial Officer. This includes all functions relating directly to overseeing the work of internal audit. In addition, senior management may also refer to any other director of the authority individually (including the Chief Executive) or collectively as the Authority Management Team in relation to GIAS (UK public sector) requirements for:

- internal audit to have direct and unrestricted access to senior management for reporting purposes
- consulting on risks affecting the authority for audit planning purposes
- approving the release of information arising from audit work to any third party.

² Application Note: Global Internal Audit Standards in the UK Public Sector

³ CIPFA Code of Practice for the Governance of Internal Audit in UK Local Government

- 3.3 The GIAS (UK public sector) also refer to the “chief audit executive”. This is taken to be the Head of Internal Audit (Veritau).

4 Scope of internal audit activities

- 4.1 The scope of internal audit work will encompass the authority’s entire control environment⁴, comprising its systems of governance, risk management, and control.
- 4.2 The scope of audit work also extends to services provided through partnership arrangements, irrespective of what legal standing or particular form these may take. The Head of Internal Audit, in consultation with all relevant parties and taking account of audit risk assessment processes, will determine what work will be carried out by the internal audit service, and what reliance may be placed on the work of other internal and external providers of assurance and advisory services auditors.

5 Responsibilities and objectives

- 5.1 The Head of Internal Audit has the responsibility to:
- At least annually, develop a risk-based internal audit work programme that considers the input of the Audit Committee and senior management. Discuss the work programme with the Audit Committee and senior management, and submit the programme to the Audit Committee for review and approval.
 - Communicate the impact of resource limitations on the internal audit work programme to the Audit Committee and senior management.
 - Review and adjust the internal audit work programme, as necessary, in response to changes in Peak District National Park Authority’s business, risks, operations, programs, systems, and controls.
 - Communicate with the Audit Committee and senior management if there are significant interim changes to the internal audit work programme.
 - Ensure internal audit engagements are performed, documented, and communicated in accordance with the GIAS (UK public sector) and relevant laws and/or regulations.
 - Follow up on engagement findings and confirm the implementation of recommendations or action plans and communicate the results of internal audit services to the Audit Committee and senior management periodically and for each engagement, as appropriate.
 - Ensure the internal audit service collectively possesses or obtains the knowledge, skills, and other competencies and qualifications needed to meet the requirements of the GIAS (UK public sector) and to fulfil the internal audit mandate.
 - Develop, implement, and maintain a quality assurance and improvement programme that covers all aspects of the internal audit service. The programme will include external and internal assessments of the internal audit service’s conformance with the GIAS (UK public sector), as well as performance

⁴ For example, the work of internal audit is not limited to the review of financial controls only.

measurement to assess the internal audit service's progress toward the achievement of its objectives and promotion of continuous improvement.

- Communicate with the Audit Committee and senior management about the internal audit service's quality assurance and improvement programme, including the outcomes of internal assessments and external assessments.
- Identify and consider trends and emerging issues that could Peak District National Park Authority communicate to the Audit Committee and senior management as appropriate.
- Consider emerging trends and successful practices in internal auditing.
- Establish and ensure adherence to methodologies designed to guide the internal audit service.
- Ensure adherence to Peak District National Park Authority relevant policies and procedures unless such policies and procedures conflict with the internal audit charter or the GIAS (UK public sector). Any such conflicts will be resolved or documented and communicated to the Audit Committee and senior management.
- Coordinate activities and consider relying upon the work of other internal and external providers of assurance and advisory services. If the Head of Internal Audit cannot achieve an appropriate level of coordination, the issue must be communicated to senior management and if necessary escalated to the Audit Committee.

5.2 In addition to the responsibilities set out above, to meet the requirements for the practice of internal auditing in local government, the Head of Internal Audit is also required to provide an annual report to the Audit Committee. The report will be used by the committee to inform its consideration of the authority's annual governance statement. The report will include:

- the Head of Internal Audit's opinion on the adequacy and effectiveness of the authority's framework of governance, risk management, and control
- any qualifications to the opinion, together with the reasons for those qualifications (including any impairment to independence or objectivity)
- any particular control weakness judged to be relevant to the preparation of the annual governance statement
- a summary of work undertaken to support the opinion, including any reliance placed on the work of other assurance providers
- an overall summary of internal audit performance and the results of the internal audit service's quality assurance and improvement programme
- a statement on conformance with the GIAS (UK public sector).

5.2 To support the opinion, the Head of Internal Audit will ensure that an appropriate programme of audit work is undertaken. In determining what work to undertake, the internal audit service should:

- adopt an overall strategy, setting out how the service will be delivered in accordance with this charter
- draw up an indicative risk-based programme of work on an annual basis following consultation with the Audit Committee and senior management. The programme

of work will also reflect the requirements of the charter, the strategy, and proper practice

- update the programme of work throughout the year to reflect emerging risks, changes to priorities and the need to appropriately schedule work
- consider trends and emerging issues that may impact the organisation.

5.3 In undertaking this work, the responsibilities of the internal audit service will include:

- providing assurance to the Audit Committee and senior management on the effective operation of governance arrangements and the internal control environment operating at the authority⁵
- objectively examining, evaluating and reporting on the probity, legality and value for money of the authority's arrangements for service delivery
- reviewing the authority's financial arrangements to ensure that proper accounting controls, systems and procedures are maintained and, where necessary, make recommendations for improvement
- helping to secure the effective operation of proper controls to minimise the risk of loss, the inefficient use of resources, and the potential for fraud and other wrongdoing
- acting as a means of deterring all fraudulent activity, corruption and other wrongdoing; this includes conducting investigations into matters referred by councillors, officers, and the public and reporting findings of those investigations to the relevant officers and councillors, as appropriate, for action
- advising the authority on relevant counter fraud and corruption policies and measures.

5.4 The Head of Internal Audit will ensure that the service is provided in accordance with proper practice as set out above and in accordance with any other relevant standards – for example, authority policy and legal or professional standards and guidance.

5.5 In undertaking their work, internal auditors should have regard to:

- the purpose of internal auditing, and standards as set out in the GIAS (UK public sector) and reflected in this charter
- the codes of any professional bodies of which they are members
- standards of conduct expected by the authority
- the Committee on Standards in Public Life's *Seven Principles of Public Life*.

6 Organisational independence

6.1 It is the responsibility of corporate directors and service managers to maintain effective systems of risk management, internal control, and governance. Auditors will have no responsibility for the implementation or operation of systems of control and will remain sufficiently independent of the activities audited to enable them to exercise objective professional judgement.

⁵ Where third parties place reliance on the assurance provided then they do so at their own risk.

- 6.2 Audit advice and recommendations will be made without prejudice to the rights of internal audit to review and make further recommendations on relevant policies, procedures, controls and operations at a later date.
- 6.3 The Head of Internal Audit will put in place measures to ensure that individual auditors remain independent of areas they are auditing for example by:
- rotation of audit staff
 - ensuring staff are not involved in auditing areas where they have recently been involved in operational management, or in providing consultancy and advice⁶.

7 Accountability, reporting lines, and relationships

- 7.1 Internal audit services are provided under contract to the authority by Veritau⁷. Staff undertaking internal audit work are employed directly by Veritau. The Director of Governance (Monitoring Officer) acts as client officer for the contract, and is responsible for overall monitoring of the service.
- 7.2 In its role in providing an independent assurance service, Veritau has direct access to councillors and senior managers and can report uncensored to them as considered necessary. Such reports may be made to:
- Authority, Executive, or any committee (including the Audit Committee)
 - Chief Executive
 - Monitoring Officer
 - Chief Financial Officer (Section 151 Officer)
 - Other corporate directors, directors, assistant directors, heads of service and service managers.
- 7.3 The Chief Financial Officer (Section 151 Officer) has specific responsibilities for ensuring that the authority has effective systems of risk management and internal control. The role includes a responsibility to ensure that the authority has put in place arrangements for effective internal audit. In recognition of the importance of the relationship between the Chief Financial Officer (Section 151 Officer) and internal audit (recognised in the standards), a protocol has been drawn up setting out the relationship between them. This is included in Appendix 1.
- 7.4 The Head of Internal Audit will report independently to the Audit Committee on:
- the proposed allocation of audit resources
 - any significant risks and control issues identified through audit work
 - their annual opinion on the authority's control environment.

⁶ Auditors will not be used on internal audit engagements where they have had direct involvement in the area within the previous 12 months.

⁷ The contract is with Veritau Public Sector Limited who provide assurance services to Peak District National Park Authority and other public sector organisations.

- 7.5 The Head of Internal Audit will informally meet in private with the chair of the Audit Committee, or the committee as a whole, as required. Meetings may be requested by committee members or the Head of Internal Audit.
- 7.6 The Audit Committee will oversee (but not direct) the work of internal audit. This includes commenting on the scope of internal audit work and approving the internal audit work programme. The committee will also protect and promote the independence and rights of internal audit to enable it to conduct its work and report on its findings as necessary⁸.

8 Fraud, consultancy services and non-audit services

- 8.1 The primary role of internal audit is to provide audit assurance services to the authority. However, the service is also required to undertake fraud investigation and other consultancy work to add value and help improve governance, risk management and control arrangements.
- 8.2 The prevention and detection of fraud and corruption is the responsibility of corporate directors and service managers. However, all instances of suspected fraud and corruption must be notified to Veritau, who will agree the course of action to be taken in consultation with the relevant corporate director and other advisors (for example, human resources). Where appropriate, cases of suspected fraud or corruption will be investigated by Veritau.
- 8.3 Veritau also carry out other consultancy related work where this is of value to the authority. This is generally at the request of authority officers. It includes, for example, advice on designing efficient and effective processes. The scope of consulting work will be agreed with the relevant corporate director or service manager. Consulting work will only be carried out where it represents good value, there are sufficient resources and skills within Veritau to undertake the work, and where it does not compromise the assurance role or the independence of internal audit. Details of all significant consultancy assignments completed will be reported to the Audit Committee.
- 8.4 Where Veritau provides non-audit services (for example information governance), appropriate safeguards will be put in place to ensure audit independence and objectivity are not compromised. These safeguards include the work being performed by a separate team with different line management arrangements. Separate reporting arrangements will also be maintained. The Head of Internal Audit will report any instances where audit independence or objectivity may be compromised to the Chief Financial Officer (Section 151 Officer) and the Audit Committee. The Head of Internal Audit will also take steps to limit any actual or perceived impairment that might occur (for example, by arranging for the audit of these services or functional activities to be overseen externally).

9 Resourcing

- 9.1 As part of the audit planning process the Head of Internal Audit will review the resources available to internal audit, to ensure that they are appropriate and

⁸ The relationship between internal audit and the Audit Committee is set out in more detail in appendix 2.

sufficient to meet the requirement to provide an opinion on the authority's control environment. Where resources are judged to be inadequate or insufficient, recommendations to address the shortfall will be made to the Chief Financial Officer (Section 151 Officer) and to the Audit Committee.

10 Rights of access

- 10.1 To enable it to fulfil its responsibilities, the authority gives internal auditors employed by Veritau the authority to:
- enter all authority premises or land, at any reasonable time
 - have access to all data, records, documents, correspondence, or other information - in whatever form - relating to the activities of the authority
 - have access to any assets of the authority and to require any employee of the authority to produce any assets under their control
 - be able to require from any employee or councillor any information or explanation necessary for the purposes of audit.
- 10.2 Corporate directors, directors, and service managers are responsible for ensuring that the rights of Veritau to access premises, records, and personnel are preserved, including where the authority's services are provided through partnership arrangements, contracts or other means.

11 Review

- 11.1 This charter will be reviewed periodically by the Head of Internal Audit. Any recommendations for change will be made to the Chief Financial Officer (Section 151 Officer) and the Audit Committee, for approval.

Relationship between the Chief Financial Officer (Section 151 Officer) and internal audit

- 1 In recognition of the statutory duties of the Authority's Chief Financial Officer in their role as Section 151 Officer, this protocol has been adopted to form the basis for a sound and effective working relationship between the Chief Financial Officer and internal audit.
 - (i) The Head of Internal Audit (HoIA) will seek to maintain a positive and effective working relationship with the Chief Financial Officer.
 - (ii) Internal audit will review the effectiveness of the Authority's systems of control, governance, and risk management and report its findings to the Chief Financial Officer (in addition to the Audit Committee).
 - (iii) The Chief Financial Officer will be asked to comment on those elements of internal audit's programme of work that relate to the discharge of their statutory duties. In developing the internal audit work programme and in carrying out internal audit work, the HoIA will give full regard to the comments of the Chief Financial Officer.
 - (iv) The HoIA will notify the Chief Financial Officer of any matter that in the HoIA's professional judgement may have implications for the Chief Financial Officer in discharging their statutory responsibilities.
 - (v) The Chief Financial Officer will notify the HoIA of any concerns that they may have about control, governance, or suspected fraud and corruption and may require internal audit to undertake further investigation or review.
 - (vi) The HoIA will be responsible for ensuring that internal audit is provided in accordance with proper practice.
 - (vii) If the HoIA identifies any shortfall in resources which may jeopardise the ability to provide an opinion on the Authority's control environment, then they will make representations to the Chief Financial Officer, as well as to the Monitoring Officer and the Audit Committee.
 - (viii) The HoIA will report to the Chief Financial Officer (and to the Monitoring Officer and Audit Committee) any instances where internal audit independence or objectivity is likely to be compromised, together with any planned remedial action.
 - (ix) The HoIA will report to the Chief Financial Officer (and the Audit Committee) any instances where audit work has not conformed to the GIAS (UK public sector). This includes the reasons for non-conformance and the possible impact on the audit opinion.
 - (x) The Chief Financial Officer will champion the role of internal audit in providing independent, risk-based assurance on the operation of the authority's systems of governance, risk management, and internal control, and in helping the authority to achieve its objectives. The Chief Financial Officer will also protect

Appendix 1

and promote the independence and rights of internal audit to enable it to conduct its work effectively and to report as necessary.

Relationship between the Audit Committee and internal audit

- 1 The Audit Committee plays a key role in ensuring the authority maintains a robust internal audit service and it is therefore essential that there is an effective working relationship between the committee and internal audit. This protocol sets out some of the key responsibilities of internal audit and the committee.
- 2 The Audit Committee will seek to:
 - (i) raise awareness of key aspects of good governance across the organisation, including the role of internal audit and risk management
 - (ii) ensure that adequate resources are provided by the authority so as to ensure that internal audit can satisfactorily discharge its responsibilities
 - (iii) protect and promote the independence and rights of internal audit to conduct its work properly and to report on its findings as necessary.
- 3 Specific responsibilities in respect of internal audit include the following.
 - (i) oversight of, and involvement in, decisions relating to how internal audit is provided
 - (ii) approval of the internal audit charter
 - (iii) consideration of the annual report and opinion of the Head of Internal Audit (HoIA) on the authority's control environment
 - (iv) consideration of other specific reports detailing the outcomes of internal audit work
 - (v) consideration of reports dealing with the performance of internal audit, and the results of its quality assurance and improvement programme
 - (vi) consideration of reports on the implementation of actions agreed as a result of audit work, and outstanding actions escalated to the committee in accordance with the approved escalation policy
 - (vii) approval (but not direction) of the annual internal audit work programme.
- 4 In relation to the Audit Committee, the HoIA will:
 - (i) attend its meetings and contribute to the agenda
 - (ii) ensure that overall internal audit objectives, work programmes, and performance are communicated to, and understood by, the committee
 - (iii) provide an annual summary of internal audit work, and an opinion on the authority's control environment, including details of unmitigated risks or other issues that need to be considered by the committee
 - (iv) establish whether anything arising from the work of the committee requires consideration of the need to change the internal audit work programme or vice versa
 - (v) highlight any shortfall in the resources available to internal audit or any instances where the independence or objectivity of internal audit work may be

compromised (and to make recommendations to address these to the committee)

- (vi) report any significant risks or control issues identified through audit work which the HoIA feels necessary to specifically report to the committee. This includes risks which management are failing to address but which the HoIA considers are unacceptable for the authority
- (vii) report any actual or attempted interference in the performance or reporting of internal audit work
- (viii) participate in the committee's review of its own remit and effectiveness
- (ix) discuss the outcomes of the quality assurance and improvement programme, and consult with the committee on how external assessment of the internal audit service will be conducted (required once every five years).

- 5 The Head of Internal Audit will informally meet in private with the chair of the Audit Committee, or the committee as a whole, as required. Meetings may be requested by committee members or the HoIA.

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Local Access Forum 11th June

Notes for the National Park Authority Meeting 11th July

The LAF showed their appreciation of Mike Rhodes who is leaving the NPA. Mike set up the LAF and has supported it throughout its existence.

The meeting started with a slide presentation complaining about suburbanisation of the countryside. Examples given included a cube concrete marker and galvanised steel gates replacing traditional wooden gates and styles. The main complaint was about the refurbishment of Dore station which is outside of the NP. Since no specific locations were given it is not possible to identify who was responsible for the other examples. The NPA should therefore note the concern expressed.

Comments were generally supportive of the PDNPA Visitors Charter and the NPA would be looking for member organisations to sign up to it shortly.

Members of the LAF stressed the importance of the forum in discussing access issues both with the NPA and between themselves, including it acting as a forum for feeding out as well as feeding in.

Martin Beer

Authority representative on the Local Access Forum.

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OUTSIDE BODY AND CONFERENCE FEEDBACK REPORT

Name of Body	Derbyshire Archaeological Advisory Committee (DAAC)
Date of Meeting	25 June 2025
Member in attendance	Ken Smith
Supporting Officer	Anna Badcock
Issues raised at the meeting of significance to the Authority	
1.	<p>Planning and Infrastructure Bill implications: potential removal of requirement for National Infrastructure Projects to undertake consultation of Historic Environment Records as part of their development; potentially negative impacts on cultural heritage assets if not identified early in the development of such projects.</p> <p>There is currently a review of the statutory consultees on planning applications. There appears to be a danger that The Gardens Trust – which comments on applications that may impact on historic parks and gardens - may be removed; this could be to the detriment of the conservation of such heritage assets.</p>
2.	<p>Authority heritage officers have been successful in securing 3 grants for heritage projects:</p> <ul style="list-style-type: none"> • A grant from Historic England (£54,475) for the development of an Archaeological Research Framework for the Peak District which will guide the research focus of archaeological work in the Peak District, particularly work done through the development process; • A grant from the NLHF (£198,000, plus £7500 from the Peak Park Foundation) for the Development Phase of a project: People of the Peak: Past. Present and Future, aimed particularly at increasing volunteer engagement and, particularly, its diversity; • A grant from the National Archives (£45,000 plus £10,000 from the Peak Park Foundation) for digitising and archiving the 45,000-item photographic archive held by the Authority. A partnership project with the Derbyshire Record Office.
3.	<p><i>Archaeology and Conservation in Derbyshire and the Peak District</i> (ACID) is an annual archaeological publication funded jointly by the Authority and Derbyshire County Council (£2600 each). It highlights archaeological work across the County and the Peak District. Resource constraints at DCC meant that a one-off crowd-funding exercise, use of DAAC reserves and the contribution from the PDNPA enabled a reduced print-run of 3000 last year. The DCC Historic Environment Record is able to make a £1600 contribution towards this year's costs and it is hoped that the full DCC contribution will be forthcoming in due course. ACID is distributed for free across the County and Peak District, via libraries, visitor centres and other outlets, starting at Derbyshire Archaeology Day in January, in Chesterfield, which is attended by 400+ people.</p>
4.	
Issues on which the views of Authority Members are sought	
1.	
2.	

Relevant documents such as reports and hyperlinks	
1.	
2.	