



Planning

Peak District National Park Authority

Internal Audit Report

Business Unit: Planning
Responsible Officer: Head of Planning
Date Issued: 5th May 2023
Status: Final
Reference: P3330/001

	P1	P2	P3
Actions	0	1	0
Overall Audit Opinion	Substantial Assurance		

Summary and Overall Conclusions

Introduction

The Peak District National Park Authority is the statutory planning authority for land and property within the National Park Area. As the planning authority, it is responsible for guiding development and meeting statutory duties as well as safeguarding the natural environment and heritage of the area. Strategic principles for planning have been established in the Local Development Framework Core Strategy. Operational policies to implement the core strategy are contained within a number of Development Management Policies.

The authority receives around 1200 planning applications each year. Statutory timescales for processing applications are in place, depending on the nature and scope of the proposed work. The majority of applications received are minor and these should be processed within 8 weeks. A minimal amount of major applications are received and these have a target time of 13 weeks. The authority also receives a small number of Mineral & Waste applications each year, these have target time of 16 weeks for processing.

Performance and compliance with these targets are reported to the government each quarter via the PS2 statistical return. Figures are published in the planning application statistics report.

Objectives and Scope of the Audit

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

- Planning applications were processed in a timely manner, with payments being received appropriately.
- Statutory timescales were being met and suitable performance management processes were in place.
- Planning risks were being managed appropriately with consideration to approvals, rejections and appeals.

Key Findings

Applications are initially processed by the Customer Business Support Team, who validate the information received against a predetermined checklist. For the 10 applications sampled, 9 had been validated in an appropriate timescale with all elements of the validation checklist met. 1 application was provided with an invalid letter, with an updated application received and validated within the same timescale as the others sampled. As part of the validation process, applications cannot be validated without payment being received. Majority of payments are received electronically with the application through the Planning Portal. Payments for all sampled applications were received through the Planning Portal prior to validation, with receipt proof retained as evidence.

The authority is expected to send a quarterly PS2 return to the government regarding their progress on applications. For 2022 the authority decided only 57% of applications in the statutory timescales which is below the 70% statutory target set out by the government, however it managed a 78% for Quarter 4 indicating improvements have been made. In the 2019 report, issues were noted around the process of agreeing extensions. Upon review of a sample, these inconsistencies appeared to have not been addressed, with extensions not consistently agreed in writing and the documentation of agreed extensions still not being uploaded onto the planning HUB.

The 2023 Organisational Change Proposal highlights the staffing issue in the planning department as a key issue to be addressed due to the increased number of applications over the last 2 years and decreasing level in performance. This was evident when carrying out the sample testing on applications from 2022 whereby several ongoing applications had changes to their responsible officers of which were no longer at the authority. The Head of Planning also reviews performance in line with the key performance indicators laid out in the authority's Corporate Performance Plan. Outcomes of applications from the planning committee that are contrary to officer recommendation are assessed to identify any issues which may need to be addressed. These applications are monitored and are reported to the National Park Authority as part of performance monitoring.

All applications are reviewed against the authority's Core Strategy & Development Management Policies which outlines all the necessary policies which applications have to adhere to and are referenced in any rejections. All applications are determined by Planning Officers, however, any applications which may be deemed major or sensitive or have more than three substantial and valid objections, are referred to the Planning Committee to review. Planning Committee meetings are held monthly with all meeting minutes available. A review of Planning Committee meetings between December 2022 and March 2023 was conducted, with all relevant information provided prior to the meeting and suitable scrutiny and decision making highlighted in the meeting minutes.

The applicant has the right to appeal if the application is refused or not determined within the statutory timescale. During 2022, 14 applications were appealed to the Planning Inspectorate, 7 of which had their appeals determined at the time of audit. Of these applications, 2 were appealed as a decision was not made within the statutory deadline, 1 of which was approved. The other 5 applications were determined by Planning Officers, with 2 of the 5 appeals being successful. Each month, the Planning Committee is provided with the Head of Law report which summarises the decisions, with an annual report giving an overview of the appeals for the year. This gives the planning committee and the Head of Planning oversight and the ability to review processes. Although the Head of Law report is provided to committee members as a standing agenda, there was no recorded notes within the minutes that it has discussed during the Committee Meetings. Any appeal decisions that contradicts the planning officer's original determination should be formally reviewed to determine if any changes are required for future applications.

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.

1. Extensions to Statutory Deadlines

Issue/Control Weakness

Extensions are not being agreed in a consistent manner, with evidence of agreeing extensions to statutory deadlines is not being stored on the HUB

Risk

Where a valid application has not been determined within the relevant statutory period, the applicant has a right to appeal and there is a potential financial loss to the authority.

Findings

The Peak District National Park Authority is required to make decisions on planning applications within statutory time limits. In certain circumstances, extended time may be required to complete the assessment which should be agreed with applicant in writing. Target dates are amended by the Planning Officer responsible for the application on the M3 planning system with any corresponding documentation stored on the authority's planning HUB. During the previous audit conducted in 2019, it was agreed that extensions of time will be agreed in writing and stored on the HUB after it was highlighted that an extension time form can be generated from the M3 system, but at the time was not fit for purpose.

Of the 1366 applications that were received in 2022, 232 applications had agreed extensions recorded on the M3 planning system. In addition, there were also a further 275 applications an agreed extensions were not requested or recorded and the deadline for completing the application was missed. A review was conducted of 10 applications, with 5 of the applications having recorded on the M3 system as agreeing an extension. Of the 5 applications only 2 had evidence that the applicant had agreed the extension with email trails provided, however these were not stored on the HUB. In all 5 instances where an agreed extension had been recorded on the M3 planning system, the target deadline had been amended within 5 days of the statutory deadline.

Due to the lack of clear documentation regarding extensions, it is difficult to determine if all extensions to time had been agreed and if these had been requested for an appropriate reason. Records should be retained in all instances to evidence cause of extensions and the applicant's agreement and where appropriate stored on the HUB.

Of the 5 applications where the deadline was missed and no extension was agreed, only 1 application had a reason why the deadline was missed, and this was due to the decision going to the Planning Committee, which was held on the day of the deadline, with the application decision being provided the day after. As part of a separate sample on appeals, 2 of the 7 appeals were lodged due to the statutory deadline being missed. It is important that the authority ensures where statutory deadlines are going to be missed that extensions are agreed in writing to prevent further incidences of appeals being lodged.

Agreed Action 1.1

The authority will create a clear audit trail of agreements to the 8-week period for determination:

- This could be achieved via a standard heading on the hub for Extensions of Time.
- This would require a planning officer to seek agreement from the applicant or agent for a case and to receive an email to such effect as evidence.
- The email should then be consistently uploaded to the hub under the new heading.
- This approach will require a request to our IT team to amend the HUB format
- Once in place a communication can be made to all planning officers to upload consistently in this way.
- In the meantime, officers can still be encouraged to upload any agreements they have made, and these can be added to the general correspondence sections.

Priority

2

Responsible Officer

Head of Planning

Timescale

31st August 2023

Audit Opinions and Priorities for Actions

Audit Opinions

Our work is based on using a variety of audit techniques to test the operation of systems. This may include sampling and data analysis of wider populations. It cannot guarantee the elimination of fraud or error. Our opinion relates only to the objectives set out in the audit scope and is based on risks related to those objectives that we identify at the time of the audit.

Our overall audit opinion is based on 4 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.

Priorities for Actions

Priority 1	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Priority 2	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Priority 3	The system objectives are not exposed to significant risk, but the issue merits attention by management.

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