SOUTH LANARKSHIRE
Leisure & Culture

BOARD MEETING – WEDNESDAY 2 September, 2:25PM
Location: Cadzow Room, Hamilton Townhouse
AGENDA

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Date of Next Board Meeting – Wednesday 18 November 2026

SOUTH LANARKSHIRE
Leisure & Culture

Agenda Item
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South Lanarkshire Leisure and Culture SCIO is Scottish Charitable Incorporated Organisation (Scottish charity number SC023549) responsible for the operation, management and delivery of leisure and cultural activities on behalf of South Lanarkshire Council.

Minutes of Meeting of the Board of Trustees of South Lanarkshire Leisure and Culture SCIO (SLLC) held at Hamilton Townhouse at 2:45pm on Thursday 03 June 2026.

1. Sederunt

Chair:
Dr Avril Osborne

Vice Chair:
Cllr Maureen Devlin

Board Members:
Dr Angela Beggan, Neil Brown, Craig Cunningham, Lisa Maule, Stephen Smellie

In Attendance:
Nick Lansdell (Chief Executive)
Gillian Simpson (Head of Strategy and Governance, Board Secretary)
David Carter (Head of Operations and Estates)
Martin Cryans (Head of Business Development)
Ross McKie (Head of Corporate Services)
Kevin Carr (Executive Director, Community and Enterprise Resources)
Michelle Wilkie (Performance and Policy Development Manager, Community and Enterprise Resources) – *agenda item 7 only.*
Victoria Nelson (Project Development Officer, Community and Enterprise Resources) – *agenda item 8 only.*
Iain Ross (Economic Development Manager, Community and Enterprise Resources) – *agenda item 8 only.*
Stefano Faiella (Threesixty Architecture Ltd) - *agenda item 8 only.*

The Chair noted that this would be Councillor Devlin's last meeting. Councillor Devlin is stepping down from the Board following her appointment as Leader of the Council. The Chair thanked Councillor Devlin for her service on the Board, particularly in her role as Vice Chair.

2. Apologies

Cllr Richard Nelson, Cllr Mo Razzaq, Dr Gordon Jack, Chris Goudie

3. Declarations of Interest

Lisa Maule declared that she is currently employed by Historic Environmental Scotland.

4. Minutes of Previous Meeting

The minutes of the Board meeting held on Thursday 05 March 2026 were submitted for Board approval as a correct record.

The following updates were provided on the previous minutes:

- South Lanarkshire Council have confirmed no funds would be given to SLLC to compensate for additional costs incurred as a result of the World Cup Bank Holiday.

The Board: approved the minutes and noted the update.

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5. Matters Arising

There were no matters arising.

6. Action Log

The action log of the Board meeting held on Thursday 05 March 2026 was submitted for Board approval as a correct record.

The Board: approved the action log.

7. Accounts Commission – Spotlight on Culture and Leisure Services

The Board was provided an update by Michelle Wilkie, Performance and Policy Development Manager, on South Lanarkshire Council's report to the Risk and Audit Scrutiny Committee in response to the Accounts Commission's 'Spotlight on Culture and Leisure Services'

Recommendation: The Board is asked to note the following recommendations:

(1) That the update, and associated Council report, be noted

- Trustees were advised that this report comes in direct response to the Accounts Commission's national report published in October 2025 to evaluate local performance and see how current service delivery aligns with the Commission's recommendations and expectations.
- Trustees highlighted the marked difference in the requirement for SLLC to generate its own income compared to other local areas. It was suggested that further analysis is required to help the Council fully understand and recognise the importance of SLLC's fundraising capabilities, its organisational flexibility, and the excellent work done to remain less reliant on Council finances.
- The Performance and Policy Development Manager confirmed that this had been discussed at the Council's Corporate Management Team (CMT), and it was acknowledged that extracting the precise data from the Accounts Commission report to see exactly how these figures were reached can be challenging.
- Trustees queried the contextual section of the report (section 5) and noted that specific examples of cross-organisational working seemed to be missing from the Council report, leaving it unclear whether SLLC is fully meeting expectations. The Performance and Policy Development Manager clarified that while the Accounts Commission report looks at a Scotland-wide position and offers general criticisms of local authorities, SLLC has robust evidence through its Integrated Impact Assessment (IIA) processes to show it is meeting expectations. The Executive Director of Community and Enterprise Resources clarified that the framework in place puts SLLC in a much stronger position to understand and meet these expectations. The Chief Executive confirmed that enhanced visibility and regular reporting are being maintained through CMT, formal Committees, and the Strategy & Governance team is reviewing data at a granular level, and Commissioning Plans are being actively presented on.
- The Chair highlighted the disproportionate financial hit that Leisure and Culture services are taking across Scotland. Noting the emphasis from the Accounts Commission for Local Authorities to think longer-term about the impact of resourcing these services, the Chair asked if this long-term mindset is being factored into moving forward with Strategic Plans. The Executive Director of Community and Enterprise Resources confirmed that the Council is moving into a better space regarding its internal long-term budget strategy, and all services are actively adopting this forward-thinking mindset.

The Board: approved the report.

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8. East Kilbride Town Hall

The Board were given a presentation on the East Kilbride Town Hall by Victoria Nelson, Project Development Officer, Iain Ross, Economic Development Manager, and Stefano Faiella, Threesixty Architecture Ltd.

Recommendation: The Board is asked to note the update.

- Trustees were advised that the project team has been actively progressing this initiative since 2023, framing it within the wider revisioning of East Kilbride Town Centre and focusing specifically on the updated context of the Town Hall project under the overarching masterplan.
- Trustees were advised of the invaluable input of SLLC Officers into the project. Trustees were advised that to deliver excellence and ensure capital funding deadlines are met, the project would benefit from dedicated SLLC resourcing.
- The Chair summarised the vision to establish a dynamic, interconnected cultural centre. This includes creating a main theatre space designed to match the scale and standard of Hamilton Town House. Trustees queried whether the proposed plans would assume the decommissioning or removal of the existing Arts Centre and the Village Theatre. The Economic Development Manager clarified that the current proposal stands to retain the Arts Centre, and the new Town Hall will be entirely complimentary to this. It was also clarified that the working assumption is that the Town Hall will be the primary theatre for East Kilbride, and that discussions are ongoing regarding if a community asset transfer or management model could take over the Village Theatre.
- Trustees emphasised the need for a balanced space that avoids an exclusively commercial focus. It was noted that while precise retail tenants are not yet finalised, traditional retail is being actively discouraged to prevent competition with the shopping centre. The Council is looking to adopt and adapt spaces for community utility, potentially incorporating cafés and localised service spaces.
- Trustees noted concerns regarding how the project plans to futureproof itself to remain engaging to younger generations. The Project Development Officer highlighted that this project is an opportunity to engage meaningfully with young people, noting that the team is collaborating closely with the ACE team within SLLC to establish direct channels to younger demographics.

The Board: noted the update.

9. Pride in Place

The Board was advised that SLLC have submitted an application to be represented on the Neighbourhood Board that will lead on the local Pride in Place project in Hamilton.

Recommendation: The Board is asked to note the following recommendations:

(1) That SLLC have applied to be represented on the Neighbourhood Board for Hamilton Town Centre, be noted.

- Trustees expressed support that the Head of Business Development has been put forward as the nominated representative for SLLC. Trustees were advised that shortlisting and interviews are currently underway, and the Board will be advised of the formal outcome.
- [redacted]
- During this agenda item, Trustees noted that various members of the Leadership Team are heavily involved in significant projects, and concerns were raised regarding the potential strain on the Leadership Team. The Chief Executive noted these concerns and confirmed that capacity and demands are being reviewed as part of ongoing workforce planning exercise. Additionally, the roles and support provided by the Extended Management Team were noted.

The Board: approved the report.

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10. Culture Strategy

The Board was informed of plans for the funding which has been made available by the Council to develop a Culture Strategy for South Lanarkshire.

Recommendation: The Board is asked to note the following recommendations:

(1) That the workstreams and timelines outlined within this report, be noted.

- The Head of Strategy and Governance noted plans for the £0.800m funding allocated from the Council budget over a period of 2026-2029 to develop a place-based culture strategy for South Lanarkshire.
- Trustees were advised that SLLC will lead on the development of the strategy through three core workstreams: local community initiatives, strategy development, and community grants.
- Trustees were advised that interviews for the temporary Cultural Development Officer post were successfully conducted last week and that this role will support locality-focused cultural programs.
- Trustees queried who will decide on community grant awards. The Head of Strategy and Governance clarified that while SLLC will inform and shape the grant award criteria and a panel will be established as part of the process. South Lanarkshire Council will formally administer the funds, shadowing existing council frameworks.
- The Chair noted that the funding and the strategic approach represented very good news for the organisation and local communities alike.

The Board: approved the report.

11. Performance, Finance and Audit Committee Update

The Interim Chair of the Performance, Finance and Audit Committee (PFAC) updated on issues discussed and decisions taken at the Committee.

The Board: noted the update.

11a. Performance, Finance and Audit Committee - Role of Health and Safety Representative

The Board was presented with an update on the Role of Health and Safety Representative. This paper was referred from PFAC of 11 May 2026.

Recommendation: The Board is asked to approve the following recommendations:

(1) That the contents of this report be noted, and
(2) That the proposed revised remit for the Trustee Health and Safety Representative is approved, and
(3) That the Approved Safety for Executives and Directors training be made available to any Trustee who was unable to attend in August 2025

- The Chair expressed the Board's formal gratitude to the Health and Safety Representative for his extensive work, attention, and energy in compiling the comprehensive report.
- The Health and Safety Representative noted that the remit had previously been untried and untested and noted that attending the quarterly Health and Safety Working Group meetings had proven to be the best mechanism for achieving the remit. It was recommended that attendance at this working group be formally embedding into the Trustee Health and Safety Representative remit to ensure continuity.
- The Interim Chair of PFAC cautioned that writing strict mandatory attendance into the formal remit could present an onerous long-term commitment for future Trustees undertaking this responsibility, noting the meetings are lengthy (typically 3 to 4 hours). It was noted that discussion took place at PFAC about this meeting being a listening brief only, with no expectation of extensive preparation or operational involvement.

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- The Chair suggested addressing this commitment level within the Terms of Reference by adopting flexible phrasing such as "*may regularly attend*", allowing the level of attendance to remain a judgment call for the incumbent Trustee.
- The Health and Safety Representative noted that while seven Trustees had previously completed the "Approved Safety for Executives and Directors" course, those who were unable to attend should be strongly encouraged to do so to ensure the wider Board remains appropriately trained.
- Trustees suggested that the broader health and safety training could be aligned with the onboarding of the new Trustee and Chair later this year. The Chief Executive confirmed that this alignment would be actioned.
- The Chair confirmed with the current Health and Safety representative their willingness to continue in the role, noting that as such time as this was no longer the case, appropriate mechanisms would be executed to transfer the role.

The Board: noted the contents of the report, and approved the recommendations, with the revision of wording for the remit suggested above.

11b. Performance, Finance and Audit Committee – Policy Updates

The Board was presented with proposed updates to policy frameworks. The report highlighted that while SLLC has previously relied on the Council's policies, a recent internal review by the Compliance Team identified the need to establish its own specific policies. Consequently, the PFAC of 11 May 2026 endorsed and remitted two new standalone draft policies for Board approval.

Recommendation: The Board is asked to approve the following recommendations:

(1) That the new Counter Fraud, Bribery and Corruption Policy be approved, and
(2) That the new Data Protection Policy be approved.

- Trustees were advised that a comprehensive policy index and risk-based review framework are currently being established. It was requested that a future paper outlining the overarching review framework be brought to the Board for consideration before the wider policy review piece is fully undertaken.
- Trustees emphasised the importance of ensuring that while SLLC's policies remain closely aligned with those of the Council, they must remain distinctly separate to reflect that they are different organisations with differing operational requirements.

The Board: approved the proposed policies.

11c. Performance, Finance and Audit Committee – Chair

The Board was presented with a report regarding the appointment of an interim Chair for the PFAC following the resignation of Alan Morrison in February 2026.

Recommendation: The Board is asked to approve the following recommendations:

(1) That the proposal for Stephen Smeillie to take on the role of interim Chair of the Committee be approved.

- Trustees noted that Stephen has put himself forward to take on the role on an interim basis until the Annual General Meeting in November 2026. The Chair and Board extended thanks for stepping into the role.
- Trustees were advised that the ongoing Chair and Trustee recruitment process has specifically incorporated financial and audit experience as key selection criteria.

The Board: approved the recommendations.

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12. Nominations Committee - Update

The Board was given a verbal update on ongoing recruitment exercise for a new Chair and Trustee.

The Board: noted the update

13. Policy & Strategy Committee – Update

The Chair of the Policy and Strategy Committee updated on issues discussed at the Committee and decisions taken.

The Board: noted the update.

13a. Policy & Strategy Committee – Council Area Committee Presentations

The Board was presented with a copy of the Area Committee Presentations that have been aligned to the Council's Commissioning Plan for services delivered by SLLC.

Recommendation: The Board is asked to approve the following recommendations:

(1) That the draft presentations are noted, and
(2) That the next steps are noted.

- The Chair expressed a strong desire to see continued strategic thinking and closer collaboration between the Board and leadership colleagues and this Policy and Strategy Committee is a prime example of this.
- The Committee acknowledged the tight scheduling issue, noting that because the first Area Committee took place earlier today and the presentations required submission to the Council ahead of formal Board sign-off.
- Trustees were advised that feedback from the Area Committees will be reported back to the next Policy and Strategy Committee meeting and will inform the development of the annual report Strategic Commissioning Plan Report to Board and South Lanarkshire Council.

The Board: approved the recommendations.

14. Revenue Budget 2025/26 – Quarter 4 Update

The Board was updated on the most recent 2025/26 budget monitoring position as at 28 February 2026, and the current projected outturn for financial year 2025/26.

Recommendation: The Board is asked to approve the following recommendations:

(1) That the contents of the report are noted.

- Trustees were advised that the projected outturn for the 2025/26 financial year indicates a total overspend of £0.561m. Trustees were advised that the primary drivers of this overspend are increased expenditure on property costs (specifically water charges, repairs, and maintenance), and supplies and services.
- Trustees were advised that an estimated underspend of £0.521m is anticipated for SLLC utilities costs, though retaining this surplus is dependent on an upcoming decision by the Council's Executive Committee.
- Trustees were advised that further updates and year-end position would be updated at the September Board meeting.

The Board: approved the recommendations.

15. Revenue Budget 2026/27

The Board was updated on the base revenue budget for 2026/27.

Recommendation: The Board is asked to approve the following recommendations:

(1) That the contents of the report are noted.

- Trustees were advised of an initial budget gap of £3.518m for the 2026/27 financial year. Trustees were advised that the gap is being fully met through £2.336m in increased income generation, £0.033m in general efficiencies, and a one-off draw down of £1.149m from reserves.
- Trustees were advised that the SLLC financial business plan will be updated with these baseline assumptions and presented at the September Board meeting, including any necessary revisions to the reserves policy.

The Board: approved the recommendations.

16. Performance Report – Quarter 3

The Board was presented with the performance report for Q4 (January to March 2026)

- The report provides information around targets and positive and negative positions.
- Trustees were advised that future performance reports will evaluate budget targets quarterly rather than cumulatively to improve seasonal analysis.
- Trustees noted strong year-on-year growth recorded in junior fitness, swimming lessons, Activage, and golf, all exceeding annual targets.
- Trustees noted that leisure centre visits dropped slightly due to temporary refurbishment closures. The Board expressed thanks to the Council for a £2.74m transformation fund allocation for gym and studio modernisations and refurbishments.
- Trustees were advised that early enabling works and partial demolition works are now underway at Larkhall Leisure Centre.
- Trustees were advised of £0.713m funding secured for Summer of Sport from Sportscotland for free summer activities for young people, extending into autumn and winter months.
- Trustees were advised that more performance reporting around the Growth Plan will be incorporated into future performance reports.
- Trustees queried figures within the staffing section of the report, noting reference to difficulties in filling posts given that fixed-term contracts lasting only until March 2027 may continue to impact long-term retention. The Head of Corporate Services advised that posts are currently being reviewed as part of the modernisation process and noted that any critical posts are not being advertised as fixed term.

The Board: noted the update.

17. AOCB

- No other business.

18. Risk Register Implications

- Discussion took place regarding whether current capacity and resources of the Leadership Team are sufficient to service ongoing projects and developments, included but not limited to Pride in Place, Culture Strategy, Town Centre Masterplans, Estates Strategy.
- The Chief Executive acknowledged that this was a reasonable concern, particularly looking ahead to the coming year. It was noted that while new initiatives bring some additional resources, the Leadership Team is increasingly being pulled into these extra demands without additional resourcing.
- The Board Secretary noted that item 5 within the risk register can be updated to reflect these resourcing concerns.
- Brief discussion took place around the capacity of the Extended Management Team (EMT) to support these workstreams. However, it was recognised that funding challenges complicate preferred mitigations, though some projects (such as the Front of House project) are actively building resources.

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- Trustees noted that while grant funding offers some flexibility for the EMT to resource specific needs, the organisation must be careful not to stray into purely operational matters. The core challenge remains that the organisation has a small footprint but a massive span of developmental work.

The Board: agreed that these capacity and resource constraints are a valid risk and should be added to Item 5 of the Risk Register: 'Lack of staff, staff skills and the capacity to deliver the Service'

19. Date of Next Meeting

The next Standard Board meeting is Wednesday 02 September 2026.

Chair

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Board Action Log

Agenda Item
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Blue – Action is complete
Red – Action not on track with major issues
Amber – Action mainly on track with some minor issues
Green – Action is on track

Board Meeting – 3 June 2026				
Agenda Item	**Action**	**Person(s) Responsible**	**Timescale**	**B/R/A/G**
Agenda Item 9 Pride in Place	Board to be notified on outcome of Pride in Place nomination	Chief Executive	Once known	On Track
Agenda Item 11a PFAC Role of H&S Representative	Approved Safety for Executives Training to be made available to any new Trustee or anyone who was unable to attend previously	Head of Strategy and Governance	Post AGM in November 2026	On Track
Agenda Item 11b Policy Updates	A policy index and risk-based review framework to be presented to the Board for consideration	Head of Strategy and Governance	September 2026	On Track
Agenda Item 13a Council Area Committee Presentations	Feedback to be presented to Policy and Strategy Committee	Head of Strategy and Governance	August 2026	On Track
Agenda Item 18 Risk Register	Leadership Team capacity and resource constraints to be added to Risk Register	Head of Strategy and Governance	September 2026	On Track

Actions carried over from Previous Standard Board Meetings

Board Meeting – 5 March 2026				
Agenda Item	**Action**	**Person(s) Responsible**	**Timescale**	**B/R/A/G**
Agenda Item 4 Minutes of Previous Meeting	Board to sign off on the Strategic Commissioning Plan performance report before it goes to Community and Enterprise Committee	Head of Strategy and Governance	November 2026	On track
Agenda Item 6 Action Log	A review of the induction process and associated training to be undertaken and implemented in advance of the new Chair and Trustee appointments in November	Head of Strategy and Governance	November 2026	On track

Agenda Item 8 Audit Plan	Henderson Logie (External Auditors) to attend the next Board meeting in June	Head of Corporate Services	September 2026 *(unable to attend in June)*	On track
Agenda Item 10 Performance Report	Update on Growth Strategy indicators to be presented to June Special Board meeting	Head of Business Development	June 2026	Complete
Agenda Item 15 Strategy 2027-32 Indicative Timeline	Information on Marmot Pilot to be presented to the Board	Head of Strategy and Governance (Board Secretary)	Scheduled for November Board Meeting	On track

Board Meeting – 29 May 2025				
Agenda Item	**Action**	**Person(s) Responsible**	**Timescale**	**B/R/A/G**
Agenda Item 12 SLLC Employee Survey Findings and Action Plan	A survey of the casual workforce will be developed and circulated in the coming months.	Head of Corporate Services	First half of 2026	On track

Board Meeting – 5 March 2025				
Agenda Item	**Action**	**Person(s) Responsible**	**Timescale**	**B/R/A/G**
Agenda Item 10 Savings Proposals 2025/26	The scope of the halls business model review will be expanded and presented to the Board after further consultation with user groups.	Head of Operations and Estates	November 2025	18 November 2026
Agenda Item 13 Board Health and Safety Representative Remit	An update on the effectiveness of the Board Health and Safety representative remit will be brought to the Board after a full year cycle.	Head of Strategy and Governance (Board Secretary)	PFA Committee in May and Board in June 2026	Complete

Board Meeting – 4 September 2024				
Agenda Item	**Action**	**Person(s) Responsible**	**Timescale**	**B/R/A/G**
Agenda Item 12 AOCB	Equalities Training – an updated link to training modules to be issued to Trustees once available following Fusion update.	Head of Strategy and Governance (Board Secretary)	Modules sent to Trustees via email on 29 June 2026 requesting confirmation of completion	Complete

Board Meeting – 28 February 2024				
Agenda Item	**Action**	**Person(s) Responsible**	**Timescale**	**B/R/A/G**
Agenda Item 9 Governance Guide	Approved with further formal review to take place in 2027.	Head of Strategy and Governance (Board Secretary)	Scheduled for 2027	On track

Agenda Item

9

PERFORMANCE, FINANCE AND AUDIT COMMITTEE UPDATE

17 August 2026

1. The meeting was chaired by Stephen Smeillie.

2. Key issues considered:

- Internal Audit Activity Report
- Procurement Update
- Bad Debt Update
- Staff Governance Framework
- Policy Review Proposals and Latest Policy Updates
  a) Breastfeeding Policy (new)
  b) IT Acceptable Use Policy (updated)
- Health and Safety Annual Report

Standing Items
- Information Security Incidents
- Health and Safety Update
- Risk Register Update

3. Key issues to highlight:

- Positive feedback received from Trustees on the overall assurance provided within the Internal Audit Assurance report
- Folowing discussions at the previous Committee meeting, and further corespondance with the Council, an updated version of the revised Standing Orders was presented for consideration. This included a proposed increase to the formal procurement activity threshold to £10k.
- The Committee noted that within the Standing Orders there is reference to sign off by the SLLC Chief Executive and/or Board Secretary. Committee requested a similar level of resilience for Chair sign off, to be updated to include approval by the Chair and/or Vice Chair.
- Committee noted that debt levels are lower than last year, write offs are stable and that there has been good effort across services in debt recovery.
- Committee were provided with an overview of the existing staff governance framework for SLLC and the proposal for an annual summary report going forward. Committee noted the need for regular reinforcement of the principles / policies.
- Committee noted the low levels of accidents (2.6 per 100,000) and the excellent progress being made in terms of the health and safety action plan.

4. Any decisions/approvals taken to highlight:

- The Committee approved that the following reports be remitted to Board for approval:
  a) Internal Audit Assurance Report
  b) Procurement – Amendments to Standing Orders
  c) Staff Governance Framework
  d) Policy Review Proposals and Latest Policy Updates
  e) Health and Safety Annual report

5. Any risks identified to highlight:

- There were no significant risks to add to the register as a result of the Committee meeting.

Agenda Item

Report

9a

Report to:	**Board of Trustees**
Date of Meeting:	**2 September 2026**
Report by:	**Internal Audit Manager (Chief Internal Auditor)**

Subject:	**Internal Audit Annual Assurance Report 2025/2026**

1. Purpose of Report

1.1 The purpose of the report is to:-

- update the Board on the internal audit service's compliance with the Global Internal Audit Standards during 2025/2026
- provide a summary of the progress and performance of Internal Audit in the provision of internal audit services to South Lanarkshire Leisure and Culture in 2025/2026
- advise the Board of the independent conclusion and opinion on the adequacy and effectiveness of SLLC's framework of governance, risk management and control arrangements for the 2025/2026 as reported to the Performance, Finance and Audit Committee on 17 August 2026

2. Recommendation(s)

2.1 The Board is asked to approve the following recommendation(s):-

(1) that Internal Audit's assessed level of compliance with the Global Internal Audit Standards be noted (3.5);

(2) that the conclusion of the Performance, Finance and Audit Committee that Internal Audit's workload, performance and audit findings are sufficient to support the annual assurance opinion be noted (4.3);

(3) that Internal Audit's conclusions on the level of assurance for 2025/2026, be noted (5.7).

3. Compliance with the Global Internal Audit Standards

3.1 Internal Audit forms part of South Lanarkshire Leisure and Culture's (SLLC) wider governance framework and its primary objective is to evaluate and improve the effectiveness of governance, risk management and control processes. As a function, it does this by delivering a programme of audit assignments, the output from which allows Internal Audit to conclude and report within the Annual Assurance Report on the effectiveness of the organisation's framework of governance, risk management and control arrangements in the financial year.

3.2 As outlined in the May 2025 report to the Board, delivery of the Internal Audit Service is within the context of the Global Internal Audit Standards (GIAS). These Standards set out the role of the Board as 'those charged with (the) governance' of SLLC. The responsibilities of those 'charged with governance' include:

- providing the mandate setting out the authority, role and responsibilities under which Internal Audit operates
- reviewing and approving the internal audit charter as reflecting expectations of the internal audit service that will be delivered within SLLC
- obtaining assurance that Internal Audit is fulfilling its mandate
- reviewing the governance arrangements of the internal audit function, including its compliance with the Standards.

3.3 The Board, in May 2025, provided the mandate, agreed the charter and approved the 2025/2026 Internal Audit Plan and that the responsibility for monitoring Internal Audit's progress and performance with the delivery of the Plan would be delegated to the Performance, Finance and Audit Committee (PFA). In this respect, Internal Audit progress reports have been provided to this Committee throughout 2025/2026 and the Committee Chair has, in turn, reported to the Board as part of the wider PFA updates presented to each meeting of the Board. The October PFA update (presented to the November Board) included an overview of mid-year progress.

3.4 Internal Audit has developed a Quality Assurance and Improvement Programme (QAIP) in line with the requirements of GIAS, that has been used to self-assess the function's compliance with the Standards in 2025/2026 and to demonstrate that internal audit activity has been delivered in accordance with the Internal Audit Mandate and Charter, that the Service is operating in an efficient and effective manner and that audit activity is perceived by SLLC to be adding value and improving operations (see Appendix One).

3.5 The annual self-assessment for 2025/2026 has concluded that the Service is complying with the principals and instructions of the Standards and that, at no point during the year, has the function's objectivity or independence been impaired in the delivery of the internal audit service to SLLC. It should be noted that, although the function is generally compliant with GIAS principles, the Standards were only introduced at the start of 2025/2026 and so there remain opportunities for the function to *further improve* compliant processes going forward. The internal audit function will continue to self-assess compliance on an annual basis with an independent inspection (required to be undertaken once in every five-year period) expected to be undertaken in 2028/2029.

3.6 The Board is asked to note the outcome of the 2025/2026 QAIP including the conclusion that Internal Audit has operated in conformance with GIAS during the year.

4. Internal Audit Progress and Performance

4.1 In line with the monitoring authority delegated to the PFA, the 2025/2026 Internal Audit Annual Assurance Report was presented to the PFA on 17 August 2026 (the full report is attached at Appendix One). The Committee was advised that:

Plan Delivery Area	Findings
Progress	100% of the planned work was complete to at least draft report stage before the Annual Report was presented to PFA. No assignments have been deferred to a future year, but advice and guidance relating to value for money assessments will continue into 2026/2027, as expected, as part of the approved Internal Audit Plan for 2026/2027. Shared systems work on Fusion controls will also carry over into 2026/2027, again as expected as part of the 2026/2027 SLLC Internal Audit Plan. The SLLC Audit Plan had 80 audit days allocated for 2025/2026. The audit work in the year has been delivered within the total days allocated and all available days have been utilised.
Performance	Audit work was generally concluded to draft report stage in the quarter it was scheduled. Audit findings were communicated following completion of audit fieldwork and quality review, and then draft reports were, generally, issued timeously thereafter. Internal Audit has provided management with the opportunity to provide feedback on Internal Audit's performance in the year during closing and update meetings and via formal feedback mechanisms. No complaints regarding the function's performance have been raised in the year. All performance indicator targets have been met in the year, with the exception of PFA attendance (one meeting was

	missed) and timely implementation of internal audit actions (the implementation of some of the overtime audit actions have been delayed). These have had no significant impact on the overall performance of the function. Six internal audit actions, due to be delivered in 2025/2026, remain open and the implementation of a further three actions from older years are still in progress due to the significance of the action (logging all museums stock and implementing the new front of house system). Timely implementation of internal audit actions remains important as identified risks remain until internal audit recommendations are fully implemented.
Output / Findings	Internal Audit's opinion on the effectiveness of governance, risk management and control processes (summarised at 5.2 below) is based on the output from the audit plan work undertaken during 2025/2026. The key findings relating to governance, risk management and internal controls were presented, in full, to the PFA, as set-out in Appendix One. This includes the wider assurances obtained by Internal Audit from their work on shared systems / processes covered by the SLC audit plan for 2025/2026. A number of control weaknesses and improvement opportunities were identified during the year which have been discussed with management and action plans agreed. There were no impairments to the independence or objectivity of Internal Audit's activity during 2025/2026, and no restrictions placed on scope, access or reporting. In addition to the assurance work undertaken directly by Internal Audit, the function has continued to ensure a level of oversight by continuing a watching brief of the wider reports being presented to PFA and the Board during the year. Whilst the work of others has been considered to provide context and oversight, the opinion at paragraph 5.2 is based solely on assurance obtained directly from Internal Audit work undertaken during 2025/2026 that relates to governance, risk management and internal control within those areas subject to audit.

4.2 The PFA considered the Annual Assurance Report on 17 August 2026 and noted the conclusions regarding Internal Audit's compliance with GIAS, performance and the overall assurance opinion. No issues were identified by the Committee that would require any amendment to the opinion presented to the Board at 5.2 below.

4.3 The Board is asked to note that Internal Audit's workload and performance in 2025/2026, along with the audit findings, was considered sufficient to support the audit opinion expressed by Internal Audit for the year.

5. Summary of Internal Audit's Conclusions and Opinion for 2025/2026

5.1 In forming the annual opinion, the Chief Internal Auditor confirmed to the PFA that Internal Audit operated independently throughout 2025/2026, that no limitations were placed on audit scope, access or reporting, and that sufficient resources were available to complete the approved audit plan.

5.2 Based on the work undertaken during the year, the Chief Internal Auditor is satisfied that SLLC has established generally adequate and effective arrangements for governance, risk management and internal control. While some control weaknesses and improvement opportunities were identified during the year, these were not considered sufficiently significant or pervasive such as to undermine the overall adequacy of the framework.

5.3 Internal Audit has operated in conformance with GIAS during the year and this opinion is based on a programme of risk-based internal audit work carried out in accordance with GIAS, together with consideration of other relevant sources of assurance.

5.4 The audit work completed provides sufficient and appropriate evidence to support this conclusion. Where Internal Audit identified areas of notable residual risk during 2025/2026, these were reported to management, to the PFA and now to the Board via the annual assurance report, with agreed actions in place. Internal Audit is satisfied that the risk acceptance position in place during the year was transparent and formally acknowledged.

5.5 The opinion does not provide assurance over any matters not subject to audit during the year, nor does it represent a guarantee that all control weaknesses or risks have been identified. Internal control remains, primarily, a management responsibility to ensure that SLLC conducts its business in a manner that has due regard to the principles of good governance.

5.6 The Board is asked to note the audit opinion being expressed for 2025/2026.

6. Employee Implications

6.1 The work within the 2025/2026 SLLC Audit Plan was carried out by members of South Lanarkshire Council's Internal Audit service which has no vacancies and had no changes to the team during 2025/2026. The team are fully or partly qualified through either the Chartered Institute of Internal Auditors or one of the Consultative Committee of Accountancy Bodies and a programme of training and development is in place.

7. Financial Implications

7.1 The 2025/2026 SLLC Internal Audit Plan was delivered within the agreed number of days.

8. Climate Change, Sustainability and Environmental Implications

8.1 There are no climate change, sustainability, or environmental implications in terms of the information contained in this report.

9. Risk and Other implications

9.1 Risks and other implications are set out in the Annual Assurance Report presented to the PFA (see Appendix One). The work undertaken by Internal Audit in the year contributes to the mitigation of several risk themes and the annual assurance report findings relate to wider SLLC outcomes as effective governance arrangements help to ensure that SLLC fulfils its planned objectives as outlined in its 2022-2027 Strategy.

9.2 There are no additional risks or implications associated with this report.

10. Integrated Impact Assessment and Consultation Requirements

10.1 This report does not introduce a new policy, function or strategy or recommend a change to existing policy, function or strategy and, therefore, no integrated impact assessment is required.

10.2 Relevant members of the Leadership Team have been consulted in advance of every planned audit assignment and following completion of fieldwork. Wider management and PFA members are also consulted during preparation of the annual audit plan. There is no requirement to undertake any further consultation in terms of the information contained within this report.

10.3 SLLC's External Auditor may wish to consider the findings from the Annual Assurance report.

Yvonne Douglas
Internal Audit Manager (Chief Internal Auditor)

17 August 2026

Link(s) to SLLC Strategy

- Organisational Sustainability – to develop a business model that allows sustainable provision of quality services in quality areas

Previous References
- Internal Audit Plan 2025/2026 (29 May 2025)
- Internal Audit Mid-Year Activity Report (13 November 2025)

List of Background Papers
- Global Internal Audit Standards

Contact for Further Information
If you would like to inspect the background papers or want further information, please contact:-

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Appendix 1

Report

Report to:	**Performance, Finance and Audit Committee**
Date of Meeting:	**17 August 2026**
Report by:	**Internal Audit Manager**

Subject:	**Internal Audit Annual Assurance Report 2025/2026**

1. Purpose of Report

1.1 The purpose of the report is to:-

- report on the progress and performance of Internal Audit in the provision of internal audit services to South Lanarkshire Leisure and Culture (SLLC) in 2025/2026
- provide an independent conclusion and opinion on the adequacy and effectiveness of SLLC's framework of governance, risk management and control arrangements for the 2025/2026 audit year
- update the Performance, Finance and Audit Committee on the Internal Audit function's compliance with the Global Internal Audit Standards during 2025/2026

2. Recommendation(s)

2.1 The Committee is asked to approve the following recommendation(s):-

(1) that the assessed level of Internal Audit's compliance with the Global Internal Audit Standards, as set out at section 3 and Appendix One, be noted;

(2) that Internal Audit's progress with delivering the 2025/2026 Internal Audit Plan, as outlined at section 4, be noted;

(3) that Internal Audit's performance, as set out in section 4 and Appendix Two, be noted;

(4) that the output and overall findings from internal audit work, as outlined in section 5, be noted; and

(5) that Internal Audit's conclusions on the level of assurance being provided in 2025/2026, as outlined in section 6, be noted.

3. Background

Purpose of Internal Audit

3.1 Internal Audit forms part of SLLC's wider governance framework and its primary objective is to evaluate and improve the effectiveness of governance, risk management and control processes. As a function, it does this by delivering a programme of audit assignments for which the output allows Internal Audit to conclude on the effectiveness of the organisation's framework of governance, risk management and control arrangements in the audit year. Delivery of this internal audit service to SLLC is in accordance with the Global Internal Audit Standards (GIAS), as outlined to the PFA Committee in February 2025.

Link to SLLC's Core Purpose, Objectives and Top Risks

3.2 South Lanarkshire Leisure and Culture is a Scottish Charitable Incorporated Organisation (SCIO) with independent status, established as an Arm's Length organisation of South Lanarkshire Council (SLC). It is the strategic lead and sole provider of leisure and culture service on behalf of the Council under an agreed

Commissioning Plan, underpinned by a performance framework. The organisation provides a wide range of programmes and initiatives across the whole of South Lanarkshire which have a positive impact on the health and wellbeing of local residents and beyond. Core services are provided on behalf of SLC and some additional activity is also undertaken to further SLLC's charitable purposes.

3.3 SLLC's vision, as outlined in the 2022-2027 Strategy**,** is to help the people of South Lanarkshire to live healthier, happier and more connected lives. The core objectives contained within this strategy focuses on:

- **Health and Wellbeing** – to help the people of South Lanarkshire to live healthier, happier lives with a focus on physical and mental wellbeing.
- **Connection and Engagement** – to enable people to connect with each other and with their community through the services provided.
- **Equality and Inclusion** – to provide accessible wellbeing and learning services through targeted interventions. Reduce inequality.
- **Organisational Sustainability** - to develop a business model that allows sustainable provision of quality services in quality areas.

The internal audit service seeks to support the objectives of SLLC through the delivery of a risk-based plan of internal audit work each year that tests processes and procedures to provide assurance around the effectiveness of SLLC's governance, risk management and control arrangements.

Approach of the Service

3.4 Annual audit planning focuses on risks (strategic / risk register) that could prevent SLLC achieving its core objectives. Risks and audit ideas are assessed and then prioritised to ensure audit focus is directed towards areas where an independent review would add greatest value to the organisation. In 2025/2026, audit work was broadly aligned to SLLC's strategic risks of *fraud and theft, reputational damage, continuous improvement, failure to achieve value for money* and *failure to demonstrate good governance.*

3.5 The controls subject to audit in any one audit year may align to broader risks in the SLLC risk register but the Audit Plan does not and cannot be expected to cover all SLLC's risks in a single audit year. Across the strategic audit plan timeframe (3-5 years) there is a wider coverage of risk and controls from the risk register. Nevertheless, there will be some risk areas for which internal audit activity would not add value and so Internal Audit activity, even across the strategic timeframe, will not cover all risks and controls. In any audit year, audit conclusions can only be provided for the risks and controls that have been subject to audit work during the audit year and as such, this annual assurance report does not provide assurance on the controls in place that work towards mitigating all SLLC's risks. Assurance on wider controls remains one that is principally provided to the Performance, Finance and Audit Committee and the Board (as the body charged with governance of SLLC), from management. Assurance may also come from other sources such as External Audit. The Institute of Internal Auditors refers to this multiple layer provision of assurance as the 'three lines' of assurance (being - management, others that provide support to management and then, independent assurance providers such as auditors).

3.6 In addition to risk coverage, the strategic audit plan also aims (risk assessment permitting) to cover SLLC's four different service areas – operational services (leisure, culture), business development, corporate services (finance, HR, IT) and strategy and governance. Audit work can often span several of these services in any one audit year.

In 2025/2026, audit work broadly spanned across all four of these services but specifically covered operational and corporate services.

3.7 In 2025/2026, Internal Audit's focus has been on providing the agreed programme of internal audit assignments and, in the context above, the function has delivered a service that aligns to the strategies, objectives, and risks of SLLC. The Audit Manager has met with representatives of the Leadership Team throughout the year and once with the full Leadership Team together.

3.8 The Standards require that the Chief Audit Executive[1] has oversight of the assurances provided to the Board from others and, in this respect, oversight in 2025/2026 has come from review of the key reports presented to the PFA Committee and the Board (such as the updates relating to Performance, Structure and Risk Register, the Annual Accounts, the SLLC Procurement Strategy and the Commissioning Plan for Services Delivered by SLLC 2025 to 2027). Internal Audit has also reviewed the Accounts Commission's October 2025 report 'Spotlight on Leisure and Culture Services' which focuses on the important contribution these services make in supporting longer-term outcomes, promoting wellbeing and preventing health issues and the challenges the sector face.

3.9 In the 2025/2026 audit year, the function has presented various reports to the PFAC Committee and to the Board. The 2024/2025 Annual Assurance Report was submitted to the PFA Committee August 2025. The Internal Audit Manager then attended relevant meetings of the PFA to present updates on progress with the 2025/2026 Plan (October 2025, February 2026, May 2026) and the 2026/2027 Audit Strategy and Internal Audit Plan (February 2026). These reports have provided updates in relation to Internal Audit's purpose, authority, responsibility and performance relative to the Audit Plan. Members of the PFA were also provided with an opportunity to meet privately with the Internal Audit Manager during the year.

Compliance with Global Internal Audit Standards

3.10 The function has developed a Quality Assurance and Improvement Programme (QAIP) in line with the requirements of the Standards, that has been used to self-assess the functions compliance with GIAS in 2025/2026 and demonstrate that internal audit activity has been delivered in accordance with the Internal Audit Mandate and Charter, that the Service is operating in an efficient and effective manner and that audit activity is perceived by SLLC to be adding value and improving operations. This annual self-assessment for 2025/2026 has concluded that the service is complying with the principals and instructions of the Standards, as set out in Appendix One, and that at no point during the year has the function's objectivity or independence been impaired in the delivery of the internal audit service to SLLC. It should be noted that, although the function is generally compliant with the GIAS principles, the Standards were only introduced at the start of 2025/2026 and so there remains opportunities for the function to *further improve* compliant processes going forward.

3.11 The internal audit function will continue to self-assess compliance on an annual basis. In addition, an independent inspection (required to be carried out once in every five-year period) is expected to be undertaken in 2028/2029.

3.12 Internal Audit also continues to compare the function's arrangements to wider best practice. Membership of the Chief Internal Auditor's Group (Scottish Local Authorities Chief Internal Auditor's Group) has continued, during 2025/2026, to provide access to a valuable network of internal auditors across Scottish Local Authorities. South

[1] Within the context of the internal audit service delivered to SLLC, this is South Lanarkshire Council's Internal Audit Manager (also referenced as the Chief Internal Auditor).

Lanarkshire Council's (SLC's) internal audit function has engaged with this Group throughout the year and has participated in sub-groups that foster an understanding of common risks and approaches in areas such as computer auditing.

Role of the Head of Internal Audit

3.13 In addition to the requirements placed on the Chief Audit Executive by GIAS, a review was undertaken of the Internal Audit Manager's role in SLC using the CIPFA Statement "The Role of the Head of Internal Audit". Using, as a benchmark, the five principles that define the core activities and behaviours that belong to the role of the Chief Internal Auditor in public service organisations and the arrangements needed to support them, the review confirmed core responsibilities were delivered in the year consistent with GIAS requirements.

4. Internal Audit Workload and Performance

4.1 To assist the PFA Committee to scrutinise Internal Audit's performance during 2025/2026, a new suite of performance indicators was developed and interim progress against these targets was set out within Internal Audit's activity reports to the PFA Committee (October 2025, February 2026 and May 2026). No concerns were raised during the year that the Plan would not be complete prior to presenting this Annual Report to the PFA Committee. The year-end position against each of the targets is now set out in Appendix Two.

4.2 Indicators focus on delivery of the plan and performance. Some indicators are principally reported to SLC in relation to the resourcing and training of the team, but these are also provided to this Committee to facilitate a complete overview of the Service's performance. Notably, in relation to these, there were no vacancies and no change to the structure during the year. Team members continue to hold an appropriate level of qualification from a recognised professional body and have undertaken continuing professional development during the year.

4.3 Key aspects of internal audit's performance in delivering the 2025/2026 Plan are outlined in more detail below.

2025/2026 Workload – Delivery of the Plan

4.4 The 2025/2026 Audit Plan, presented to the PFAC in February 2025 and Board in May 2025, set out a programme of eleven assignments across seven key areas of audit activity – these were to: -

- provide CCM data and risk indicators to facilitate further review by SLLC
- continue to review cash and stock controls in a further sample of facilities
- follow up on the implementation of audit actions agreed during 2024/2025 cash controls audit work
- provide oversight to SLLC on areas of emerging fraud risks / best practice
- provide advice and guidance to SLLC relating to the organisation's work to create an events value for money template for use by operational staff before approving specific bookings
- consider and share assurances (and risks) obtained from the functions wider audit work relating to Council process or systems that are shared by SLLC (including Fusion). This helps Internal Audit understand any wider governance, risk management or control issues relevant to SLLC
- prepare reports and present these to the PFA Committee and Board at relevant points throughout the year (Audit Plan, progress updates and Annual Report)

4.5 The function engaged with Services during the year to ensure the Audit Plan, agreed at the outset, continued to address known and emerging risks as the year progressed.

4.6 The Head of Strategy and Governance and / or the Head of Corporate Services as well as any other relevant service representatives were consulted prior to the commencement of audit work to ensure audits reflected the risks, governance and legislative frameworks relevant to the process being audited. All audit work during 2025/2026 was then conducted in conformance with GIAS.

4.7 At the last activity update to the PFA Committee, 73% of the Plan was complete to draft. Upon presentation of this Annual Report to the PFA Committee, *100% of the planned work is now complete to at least draft report stage***.** All audit findings have been discussed and action agreed with the relevant Head of Service prior to drafting this annual report. The notable findings from the audit work undertaken during 2025/2026 that relates to governance, risk management and internal controls, along with recommended audit actions (as agreed with the Head of Corporate Services), is outlined for the Committee within section 5 of this report.

4.8 No assignments have been deferred to a future year although the advice and guidance relating to the events value for money exercise will continue into 2026/2027, as expected, as part of the approved 2026/2027 SLLC Internal Audit Plan. Shared systems work on Fusion controls will also carry over into 2026/2027, again as expected as part of the 2026/2027 SLC Internal Audit Plan.

4.9 The Board approved the allocation of the audit days for 2025/2026 to seven main areas – provision of CCM data, routine audit work, follow-up, sharing oversight on risks and wider shared system audit findings, providing advice and guidance and reporting to committee (planning, monitoring and reporting). Chart 1 below sets out how the available audit days for 2025/2026 were utilised across these categories. At the close of the audit year, there has been a minor re-allocation of days between categories of work (largely between shared systems work and routine audits) but this has not impacted on the delivery of the Plan and has, in practice, facilitated a more in-depth review of stock control arrangements than was originally anticipated.

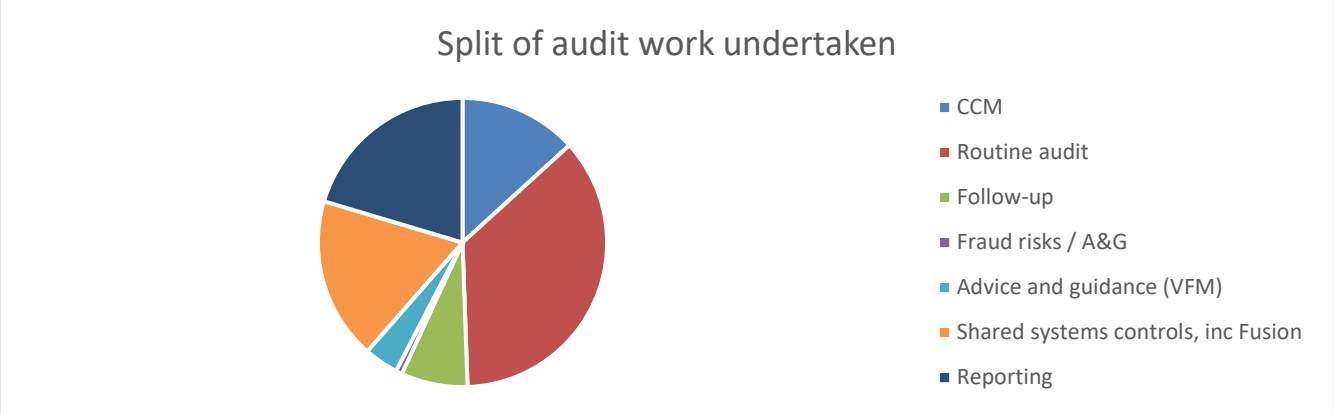

Chart 1

4.10 The Plan had 80 audit days allocated for 2025/2026. The audit work in the year has been delivered within the total days allocated and all available days have been utilised.

2025/2026 Performance – Efficiency and Effectiveness

4.11 Aside from *delivery* of the Plan, the effective and efficient performance of the team is measured by delivering individual assignments within the budgeted number of days and by draft reports being issued timeously after audit testing has been completed. The core cash and stock control testing utilised some additional days that were underutilised from shared systems Fusion testing in 2025/2026 (some of the SLC Fusion testing will be carried forward into 2026/2027). Audit work was generally

concluded to draft report stage in the quarter it was scheduled although there was a slight delay to the conclusion of the cash and stock controls report. The draft report for this assignment has been issued and the findings discussed with the Head of Corporate Services and the final report will be issued imminently. Initial assessment of the areas that should be considered in SLLC's planned VFM assessment tool are outlined in section 5.

4.12 Follow-up work was undertaken during 2025/2026 to assess the implementation of agreed audit actions from the cash controls audit work undertaken in 2024/2025. The key findings are captured in the cash and stock controls audit report and are referenced in section 5 of this report.

4.13 Internal Audit has provided management with the opportunity to provide feedback on internal audit's performance during the year during closing meetings, update meetings and via formal feedback mechanisms. No complaints regarding the function's performance have been made during the year.

4.14 Performance against all the indicators is outlined in Appendix Two and all indictors within the control of Internal Audit, with the exception of the PFA attendance[2] have met. SLLC marginally missed the target of implementing 80% of agreed audit recommendations by the due date but this was largely due to the accepted delay in implementation of some of the overtime audit actions.

4.15 The PFA Committee is asked to note Internal Audit's workload and performance through to the end of the 2025/2026 audit year and that both were sufficient to support the audit opinion expressed within this report.

5. Audit Conclusions from Audit Work Undertaken in the Year

5.1 Internal Audit's opinion on the effectiveness of governance, risk management and control processes, expressed within the report (at 6.4) is based on the output from the audit plan work undertaken during 2025/2026. This includes the wider assurances obtained by Internal Audit from their work on shared systems / processes covered by the SLC audit plan for 2025/2026. The assurances obtained specific to the governance of the organisation, risk management arrangements and internal controls are outlined below.

5.2 In addition to the assurance work undertaken directly by Internal Audit, the function has continued to carry out reviews (per 3.8) to ensure a level of oversight.

Area of Assurance – Governance

5.3 Good governance arrangements are crucial within any organisation as this promotes accountability, transparency and effective decision-making, and leads to the delivery of intended outcomes and achievement of organisational objectives.

5.4 The Head of Strategy and Governance is the principal provider of assurance to this Committee and the Board over the organisation's governance arrangements.

5.5 The Head of Corporate Services and External Audit also provide the Committee and Board with principal assurances relating to financial governance. The last formal output from External Audit was in relation to the External Auditor's 2024/2025 financial audit during 2025/2026. An unqualified opinion in relation to SLLC's financial statements was provided. A number of improvement actions were recommended by the External Auditor and these, along with the declared progress made with

[2] This missed target has been reported to PFAC previously within the 2025/2026 activity reports.

implementation of prior year external audit recommendations, have been noted by Internal Audit.

5.6 For 2025/2026, Internal Audit's conclusions on the effectiveness of governance arrangements is specific to those aspects of governance that have been subject to internal audit work during the year. The governance aspects reviewed focus on strategic direction, stewardship, leadership, oversight, accountability, decision-making, policies, communication, culture and monitoring. The findings that support this assessment are detailed in paragraphs 5.7 to 5.15. This work sought assurance that:

SLLC continue to utilise CCM data as an oversight tool and to facilitate local investigation
Corporate leads promote the implementation of audit actions
Internal audit actions are implemented timeously
Operational management's self-assessment of risk and control aligns with Internal Audit's assessment
Internal Audit advice and guidance is considered

5.7 Internal Audit continued to provide petty cash and supplier expenditure CCM data to support management oversight and assurance activities. Recommendations focus on reviewing procurement activity against Standing Orders, contract arrangements and procurement strategy. The CCM process itself represents a positive governance mechanism supporting ongoing monitoring. SLLC continue to utilise this data as a management oversight tool, which continues to facilitate reporting and informs a procurement strategy.

5.8 Good governance can be demonstrated by the timeous implementation of agreed audit actions. GIAS places a responsibility for monitoring progress with the implementation of internal audit recommendations on the Chief Audit Executive. In 2025/2026, seventeen actions from agreed internal audit recommendations fell due in relation to prior year cash control and overtime audits. A number of historic audit actions relating to the implementation of the new front of house system (sales management information and stock control) and the logging of all museum store items remained open from prior years. Updates on progress on the implementation of these actions has been provided at each meeting of this Committee throughout 2025/2026.

5.9 As at mid-July, nine internal audit actions remain open, three of which are the actions that were carried forward from historic years.

5.10 One of the 2024/2025 actions that remain open is to deliver fraud awareness training to facilities staff and this is scheduled for August 2026. Progress has been made by SLLC to implement the actions arising from the 2024/2025 overtime audit although five are carried forward into 2026/2027. Progress with implementation will continue to be monitored and formal follow-up will be carried out by the end of 2026/2027. Progress continues to be made in implementing the new front of house systems and in logging the museum inventory. As acknowledged in the SLLC risk register and reported to the Committee, completion of the museum's inventory is a considerable undertaking. Governance risks relating to incomplete inventory and valuations continues to remain until the exercise is complete. Until then, it remains possible that loss or theft would not be known and that, even when suspected, any subsequent insurance claim may not be settled due to a lack of information.

5.11 Although assurances were obtained that the Head of Corporate Services took action to implement the corporate element of the agreed cash control improvement actions

following the cash controls audit in 2024/2025, formal follow-up audit work in 2025/2026 has identified that operational teams were not all aware of the communications between the Head of Corporate Services and operational management. This has meant that some facilities continue to place reliance on local practice rather than the updated improved corporate instructions. As such, although the corporate element of improvement action has been implemented, there has been a lack of assurance that practical elements of improvement actions have been fully embedded in sample facilities.

5.12 The cash controls follow-up audit work undertaken found that, although managers had a level of oversight of the control environment within their facilities, there was limited independent management verification of cash and stock controls to ensure these were operating effectively, particularly in relation to anti-fraud controls. In addition, self-assessments of the cash control environment completed by facilities did not always align with Internal Audit findings. Internal Audit continue to emphasise the importance of operational management taking action to ensure their control environments are robust to mitigate risks. Management oversight, consistency of control implementation and control culture require strengthening across facilities.

5.13 Based on the audit work undertaken, it is Internal Audit's opinion that there is still a need for better fraud awareness within facilities and, as above, SLLC are taking positive steps to deliver fraud risk awareness training to operational management. SLLC's fraud policies have been refreshed and re-issued during 2025/2026. Again, it is essential that all relevant staff within the facilities are aware of their responsibilities outlined in these policies in relation to the prevention and detection of fraud.

5.14 In addition to the assessment of governance arrangements in place, Internal Audit is contributing to the development of these arrangements for event approval decisions by supporting the design of a formal value-for-money framework, including governance, accountability, oversight and decision-making requirements. Preliminary work in this respect has considered:

Strategic purpose and charitable governance – the need to:

- distinguish between primary purpose activity (charitable and strategic objectives / public benefit), ancillary trading and non-primary trading

Governance Framework and Oversight – the need to:

- ensure the VFM assessment tool is supported by policy / procedure
- clarify manager and leadership team responsibilities
- establish approval thresholds, escalation arrangements and oversight responsibilities
- ensure Trustees and management receive sufficient financial, risk and performance information
- consider governance requirements relating to conflict of interest, stewardship and oversight of trading activities

Transparency and accountability – the need to:

- retain sufficient audit trail
- document justification of decisions
- record approvals, authorisation
- support PFAC, Board and SMT oversight through documented and auditable decisions

5.15 SLLC intend to set-up a working group that will consider each of these areas further in 2026/2027 before proposing a draft assessment template and associated policy / procedures. Internal Audit will continue to contribute to the discussions and design before testing implementation early in 2027.

Area of Assurance – Risk Management

5.16 An effective risk management framework ensures SLLC understands and mitigates potential threats to support continuity of service and the delivery of stated objectives. By addressing risks, financial and operational impacts can be managed, and reputational damage minimised.

5.17 The Head of Strategy and Governance reports SLLC's top risks to the PFA Committee and the Board. The risk register is updated periodically, with the latest update provided to the Board in June 2026. The highest risks are financial, asset / investment and employee focused (insufficient budgets / lack of specific funding / competition from the private sector, lack of investment in assets / systems and inadequate staff numbers or skills to deliver services).

5.18 Internal Audit reviewed the thematic risk areas highlighted in the Accounts Commission Report: Spotlight on Culture and Leisure Services. Risks focus on:-

Strategic risks

- financial sustainability and medium-term financial planning (service reductions become necessary to balance budgets; leisure and culture organisations are unable to remain financially viable; increased operational costs outstrip income growth)
- prevention and wellbeing risks (risk of service reductions impacting communities - reductions in service may worsen health inequalities, reduce physical activity, increase social isolation, adversely affect vulnerable groups which in turn leads to increased demand elsewhere in public services)

Governance and Decision-Making Risks

- consultation, community engagement, equality impact assessment and legal challenge risks (failure to consult and identify impacts on protected groups, decisions made without adequate evidence, judicial review and legal challenge)
- performance measurement and decision-making risk (from lack of board oversight, performance monitoring, strategic alignment of priorities)

Service Performance Risks

- declining service usage and satisfaction (reduced public value from assets, unused capacity, falling income generation, difficulty justifying investment)
- performance reporting risks (risk that important outcomes are not adequately measured)

Transformation Risks

- transformation and capital investment delivery risk (savings not achieved, benefits not realised, negative impact on service users, reputational consequences)
- community asset transfer risks (asset deterioration, service failure, future requests for intervention)

5.19 The SLLC risk register has highlighted some of these risks for many years now and future risks registers should continue to be updated to reflect any additional aspects of these risks, as SLLC deem necessary per their own assessments.

5.20 Internal Audit work in 2025/2026 sought assurances that the organisation was managing fraud risks. At a corporate level, the SLLC risk register continues to recognise the risk of fraud and outline the key controls that SLLC deem to be in place that work to prevent fraud. These include: -

- the controls within fraud policies and the wider framework of policies and procedures (Code of Conduct, Financial Regulations etc)
- mandatory 'introduction to the Bribery Act 2010' training
- a suite of physical security measures (CCTV, alarms, safes).

5.21 The register acknowledges the need for further action in relation to the dissemination of information across the business in relation to control matters identified during audit work and this continued to be reiterated following the audit work undertaken in 2025/2026.

5.22 The 2026 risk register also captures other related fraud exposure areas, that cover risk drivers in line with good practice, including:-

- information and technology risks (cyber-attack, systems failure, asset vulnerability – potential enablers of fraud if controls fail)
- GDPR / Data Protection compliance risks (safeguarding against inappropriate access or misuse of systems and governance of data)

5.23 External Audit does not provide direct assurance on the organisation's risk management arrangements, but it does provide insight into how key risks can manifest, financially, and any controls SLLC has in place to mitigate these risks. In this respect, the unqualified audit opinion from the 2024/2025 financial audit provides the PFA Committee and the Board with a level of assurance on the management of these risks. Internal Audit note this assurance being provided by External Audit.

5.24 In relation to the specific work undertaken by Internal Audit in 2025/2026, risk management specifically featured in the year as part of Internal Audit's identification, assessment and evaluation of:-

- the likelihood and impact of risks materialising
- whether key risks are being mitigated or tolerated
- residual risk post-controls

5.25 In this respect, the following audit work, for which findings are detailed in paragraphs 5.26 to 5.33, was relevant during 2025/2026:-

Supplier expenditure CCM review
Cash and stock controls testing
Cash controls formal follow-up
Value for Money assessment of risks

5.26 The entire supplier expenditure and petty cash CCM review is structured around risk indicators including:

Supplier Expenditure

- breach of standing orders and procurement regulations
- contracts not being established in line with spend thresholds
- lack of competitive quotations
- off-contract purchasing
- inefficient supplier base and lost value-for-money opportunities
- possible year-end spending behaviours

Petty Cash

- excess cash holdings
- potential misappropriation of cash
- excessive or insufficient petty cash balances
- incorrect VAT recovery

There is also an overarching fraud risk associated with all CCM indicators.

5.27 Management continue to perform their own pro-active assessment of residual risk in each of these areas using the CCM data provided. Effective use of data analytics and CCM is assisting SLLC in identifying procurement, expenditure, petty cash and fraud-related risks and supports a more pro-active risk management approach.

5.28 In 2025/2026 key risks identified in relation to cash and stock included:-

- the risk of loss and theft of SLLC stock and cash
- the risk that loss or theft is not detected
- fraud opportunities for staff with authorised access to cash and stock
- inability to investigate discrepancies
- management not being aware of ineffective controls
- risks associated with reliance on manual stock recording processes
- reputational risks

5.29 As noted above, SLLC recognise fraud and theft as key risks.

5.30 In respect of these risks, corporate initiatives are underway to try and reduce the number of cash handling sites and improve stock recording systems. The refresh of fraud policies and provision of fraud awareness training represent additional risk mitigation actions. Residual fraud, theft and loss risks do remain, however, until control weaknesses are fully addressed by operational management.

5.31 Preparatory research around value for money has identified the following elements aimed at identifying, assessing and responding to risks arising from event approvals:-

Financial Risk

- cost recovery considerations
- financial sustainability assessments
- opportunity cost assessments
- inflation, energy cost and pricing risks

Operational Risk

- staffing capacity and overtime implications
- operational feasibility assessments
- asset protection and venue impact

- business continuity and workforce resilience considerations

Reputational and Partnership Risk
- Reputational assessment of events and organisers
- Due diligence over organisers
- Partnership and stakeholder considerations

Regulatory and Compliance Risk
- Equality and accessibility obligations
- Licensing and regulatory compliance
- Health and safety, safeguarding and security requirements

Strategic and Public Value Risk
- Risk that commercial activity overshadows charitable purpose
- Risk that decisions fail to achieve intended community outcomes
- Risk that decisions adversely affect community access and equality outcomes

5.32 These risks cross over somewhat with some of the broader risk areas identified in the Accounts Commission report (per 5.18) and Internal Audit anticipate that these areas will be considered fully by the events VFM working group in 2026/2027.

5.33 In line with the requirements of the Standards, a framework is in place through which the Chief Audit Executive can raise concerns with regards to the level of risk accepted by management. No such concerns have arisen in 2025/2026. The SLLC Leadership Team are continuing to take on board Internal Audit recommendations to mitigate identified risks and to encourage improvement actions within the operational environment.

Area of Assurance – Internal Control

5.34 Robust internal controls are important, irrespective of the activity or process, with their effective implementation supporting delivery of vital services in the delivery of leisure and culture services to communities across South Lanarkshire.

5.35 Internal Audit's conclusion expresses an audit opinion on assurances in respect of SLLC's internal control framework. The findings that support the overall assessment are detailed in paragraphs 5.36 to 5.45 and these relate to specific preventative, detective and corrective controls operating day-to-day in relation to:-

Procurement and petty cash controls
Cash and stock controls audit
Follow-up of audit actions
The findings from shared systems audits undertaken by Internal Audit

5.36 Internal control issues relate to the design and operation of processes, checks and systems in the year and included:

Procurement controls
- Compliance with procurement thresholds
- Competitive quotation and tendering controls
- Contract register monitoring
- Supplier monitoring controls

Cash and stock controls

- Security controls
- Record keeping
- Verification controls
- Audit trail

5.37 Data analytics provide a strong detective control and support targeted management review of procurement and petty cash activity.

5.38 In relation to cash and stock controls, assurance was obtained from testing that:-

- core security controls to safeguard cash and stock from the risk of theft by those not involved in cash or stock handling continue to be in place and are operating effectively
- where stock control arrangements are routed through systems, this provides a stronger level of control that some manual record keeping arrangements.
- systems audit trails support better review and monitoring

5.39 The cash and stock control areas that expose SLLC to residual risk relate to:-

Security controls

- Weak key and code management arrangements
- Stock not always secured appropriately
- Cash not always restricted within safes as intended

Record keeping

- Weak stock records
- Incomplete movement records
- Insufficient write-off records
- Inability to establish expected balances in some areas

Verification controls

- Inconsistent or infrequent balance checks
- Limited evidence of second person verification or simultaneous checks
- Infrequent petty cash reconciliations

Audit trail controls

- Safe logs not consistently maintained
- Banking records incomplete
- Float movement records not fully embedded
- Audit trail weaknesses affecting investigation capability

5.40 For these risk areas, further mitigation actions have been agreed, and a period of time will be required to fully embed the agreed action, especially where this involves updating procedures and continued control awareness raising.

5.41 Overall, reasonable assurance has been obtained regarding internal controls relating to cash and stock but some weaknesses continue in record keeping, segregation of duties, reconciliation processes, audit trail and anti-fraud controls.

5.42 In addition to the core audit work in respect of CCM and cash and stock controls, Internal Audit also obtained assurance that audit recommendations agreed following audit work undertaken in 2024/2025 was progressing, with some fully implemented. The action that has been taken to date has assisted with strengthening cash and overtime controls.

5.43 Internal Audit's wider remit has also involved continued work in 2025/2026 for South Lanarkshire Council to review controls within the Oracle Fusion cloud human resources and financial management system which SLLC also use. Internal Audit remain involved in identifying and resolving gaps in controls as the system becomes more embedded. Relevant recommendations that apply to SLLC in this area include action to ensure the reason for overtime is recorded on the system in the relevant field to assist monitoring and approval. This has been reiterated via the SLC Personnel Bulletin 33/26 'Change to overtime process – mandatory overtime reasons'. It would be prudent for SLLC to consider issuing a similar instruction to SLLC staff to improve the Fusion overtime control environment as it applies to SLLC.

5.44 In relation to the VFM assessment work, Internal Audit's initial recommendations are that the following practical preventative and detective controls are built into the VFM process: -

VFM assessment controls
- Creation of structured VFM assessment tool
- Mandatory completion of assessment fields
- Scoring methodology to promote consistency
- Decision thresholds linked to approval outcomes

Financial control activities
- Cost identification requirements
- Breakeven assessments
- Pricing justification requirements
- Consideration of staffing, utilities, equipment and opportunity costs

Operational control activities
- Verification of staffing availability
- Assessment of facility suitability and scheduling impacts
- Validation that required licences, insurance and risk assessments have been obtained

Audit trail and monitoring controls
- Documentation retention requirements
- Requirement for supporting evidence behind scoring decisions
- Annual review of monitoring arrangements
- Future Internal Audit testing of the framework (planned for later in 2026/2027)
- Data and performance controls
- Collection of attendance, demographic and performance data
- Use of KPIs and performance measures beyond financial performance

5.45 Internal Audit's advice and guidance on the design of internal controls supports SLLC in the creation of a robust events value for money assessment and internal control environment that incorporates event approval decisions, including structured assessments, approval thresholds, financial evaluation, documentation standards, audit trail requirements and performance monitoring arrangements.

6. Summary of Internal Audit's Conclusions and Opinion for 2025/2026

Context

6.1 Internal Audit's audit conclusions and overall opinion on the adequacy of governance, risk management and internal controls is based on the delivery of the approved 2025/2026 Internal Audit Plan. There were no impairments to the independence or

objectivity of Internal Audit activity during 2025/2026, and no restrictions placed on scope, access or reporting.

6.2 Whilst the work of others has been considered to provide context and oversight, the opinion at paragraph 6.4 is based solely on assurance obtained directly from Internal Audit work undertaken during 2025/2026 that relates to governance, risk management and internal control within those areas subject to audit. The summary assessments in each area that inform the overall opinion at 6.4 are as follows:-

Domain	Summary Assessment
Governance	Adequate, but further embedding of corporate control actions is required.
Risk Management	Risks recognised and managed with appropriate mitigating actions in progress.
Internal Control	Reasonable assurance albeit a level of continuing weaknesses in stock records, audit trails, segregation and verification controls.

6.3 The opinion does not provide assurance over any matters not subject to audit during the year, nor does it represent a guarantee that all control weaknesses or risks have been identified. Internal control remains, primarily, a management responsibility to ensure that SLLC conducts its business in a manner that has due regard to the principles of good governance.

Audit Opinion

6.4 Based on the work undertaken during the year, as Chief Internal Auditor, I am satisfied that SLLC has established generally adequate and effective arrangements for governance, risk management and internal control. While some control weaknesses and improvement opportunities were identified during the year, these were not considered sufficiently significant or pervasive to undermine the overall adequacy of the framework.

6.5 This opinion is based on a programme of risk-based internal audit work carried out in accordance with GIAS, together with consideration of other relevant sources of assurance.

6.6 The audit work completed provides sufficient and appropriate evidence to support this conclusion. Where Internal Audit identified areas of notable residual risk during 2025/2026, these are reported to management, and to the Board within the annual report, with agreed actions in place. Internal Audit is satisfied that the risk acceptance positions in place during the year were transparent and formally acknowledged.

6.7 Internal Audit has operated in conformance with GIAS during the year, and no significant limitations in scope or access were identified that would impact on the reliability of this opinion.

6.8 The Committee is asked to note the findings above for onward reporting to the September meeting of the Board.

7. Employee Implications

7.1 The South Lanarkshire Council Internal Audit service in 2025/2026 comprised a team of 8 (FTE 7.34). The work within the 2025/2026 SLLC Audit Plan was carried out by members of this team. The team are fully or partly qualified through either the Chartered Institute of Internal Auditors or one of the Consultative Committee of Accountancy Bodies. There were no changes to the team during the year and there are no vacancies.

7.2 Feedback received in relation to audit assignments is used to highlight areas for training and development. These are progressed on an individual basis as part of the performance development review process. Best practice information is shared and learning points discussed throughout the year.

7.3 Training arrangements include regular team briefs, internal training sessions, attendance at professional body conferences and external seminars and briefings.

8. Financial Implications

8.1 The 2025/2026 SLLC Internal Audit Plan was allocated 80 audit days from the Internal Audit function's capacity plan to deliver an audit service to SLLC during 2025/2026. This was considered sufficient to deliver the Plan. This allocation aligns to the budget that was set for the service for the year.

9. Climate Change, Sustainability and Environmental Implications

9.1 There are no climate change, sustainability, or environmental implications in terms of the information contained in this report.

10. Risk and Other implications

10.1 There are no additional risks associated with this report. The outcome of Internal Audit work undertaken in 2025/2026 will contribute to the mitigation of several risk themes, including risks associated with:-

- legislative compliance
- process / systems change
- fraud
- governance

10.2 This report relates to wider SLLC outcomes as effective governance arrangements help to ensure that SLLC fulfils its planned objectives. The contents of this report are material to the delivery of SLLC's 2022-2027 Strategy, notably the core objective relating to:-

- ensuring the business model allows sustainable provision of quality services

It also relates to the wider cross-cutting themes to ensure good governance of the organisation, accountability and to adhere to the principles and practice of best value.

10.3. Each audit assignment seeks to identify efficiencies and report these as part of the audit opinion where appropriate. In practice, this often translates to suggesting a more efficient way in which to deliver services. From SLLC's perspective, much of the 'value-added' element of an internal audit service is linked to the function's ability to provide advice and guidance relating to specific areas of governance, risk management or internal control. The new audit standards echo this by defining a wider role for an internal audit function in the provision of advice, insight, oversight and foresight.

10.4 To mitigate against the risk of non-delivery of the Plan, the progress of every assignment is monitored using Figtree risk management software.

10.5 There are no other issues associated with this report.

11. Integrated Impact Assessment and Consultation Requirements

11.1 This report does not introduce a new policy, function or strategy or recommend a change to existing policy, function or strategy and, therefore, no integrated impact assessment is required.

11.2 The Head of Strategy and Governance and / or the Head of Corporate Services is consulted in advance of every planned audit assignment and following completion of fieldwork. Wider management and PFAC members are also consulted during preparation of the annual audit plan. There is no requirement to undertake any further consultation in terms of the information contained within this report.

11.3 There were no days allocated within the 2025/2026 Plan for Internal Audit to perform work on behalf of SLLC's external auditor. However, the External Auditor may wish to consider the findings from this report.

Yvonne Douglas
Internal Audit Manager

15 July 2026

Link(s) to SLLC Strategy

- Organisational Sustainability – to develop a business model that allows sustainable provision of quality services in quality areas

Previous References

- Internal Audit Plan 2025/2026 (6 February 2025 PFAC; 29 May 2025 Board)
- Internal Audit Annual Assurance Report 2024/2025 (18 August 2025)
- Internal Audit Activity Reports (27 October 2025, 9 February 2026, 11 May 2026)

List of Background Papers

- Global Internal Audit Standards
- Figtree statistical and assurance and time recording extracts

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Quality Assurance Improvement Programme 2025/2026

Purpose of the Quality Assurance Improvement Programme: To evaluate and ensure the internal audit function conforms with the Global Internal Audit Standards, achieves performance objectives, and pursues continuous improvement.		
Internal Assessment	**Ongoing monitoring:** supervisory reviews, methodology compliance checks, file quality reviews, hot/cold reviews, and client feedback surveys embedded across engagements, performance monitoring, resourcing and skills/competency. **Periodic self-assessment:** annual review against **GIAS** requirements, with evidence mapped to the standards and examples of conformance.	Established processes and procedures within Internal Audit include specific quality reviews. Performance monitoring undertaken throughout the year and reported to PFAC and the Board. Performance data for the 2025/2026 audit year included at Appendix Two. Resourcing and skills/competency of teams set out in Section 7. Annual assessment of compliance with GIAS requirements.
External Assessment	An External Quality Assessment (EQA) is required at least once every five years.	The last EQA review of SLC's internal audit function was undertaken in 2022/2023 and reported in 2023/2024. The overall assessment was that SLC's internal audit function, 'fully conformed' with seven standards and 'generally conformed' in the remaining seven areas. This was a positive outcome with no significant areas of improvement identified.

		An action plan to address the areas for non-compliance was developed and subsequently implemented in 2023/2024. The next EQA of the internal audit function within South Lanarkshire Council will assess compliance with the Global Internal Audit Standards, effective from 1 April 2025, is scheduled for 2028/2029.
Conclusion: Based on the Quality Assurance Improvement Programme undertaken during 2025/2026, Internal Audit **generally conforms** to the **Global Internal Audit Standards** and has **met** its approved performance objectives. The Quality Assurance Improvement Programme has evidenced that the processes promote continuous improvement in supporting the organisation's objective. Where improvement opportunities were identified, actions were agreed with target dates and tracked to completion. Opportunities for Internal Audit to further improve compliant processes will continue to be assessed using the Quality Assurance Improvement Programme during 2026/2027.		

GIAS Compliance Assessment Checklist

Purpose: This checklist is designed to assess compliance with the Global Internal Audit Standards (GIAS). It covers the five domains and fifteen principles, providing a structured approach to evaluate adherence, identify gaps, and plan corrective actions.

Domain/Principle	Requirement	Evidence	Status
Domain 1: Purpose, Authority, and Responsibility Principle 1 – Purpose of Internal Audit	Is the internal audit function clearly defined in the charter? Does it align with organisational objectives?	Internal Audit Mandate and Charter sets out the purpose of the internal audit function. This was presented to the Board for the 2025/2026 year in May 2025. This document also confirms that Internal Audit seeks to enhance governance, risk management and control processes within the organisation to support achievement of objectives and organisation's ability to serve the public interest.	**C**

Domain 1: Purpose, Authority, and Responsibility Principle 2 – Independence and Objectivity	Is the internal audit function independent from management? Are safeguards in place to maintain objectivity?	The Internal Audit Mandate and Charter sets out the purpose of the Internal Audit function and states that Internal Audit is an independent assurance function. The Internal Audit function operates within a position of organisational independence with a direct accountability, within SLLC, to the Board via PFAC. Internal Audit is located within SLC Finance and Corporate Resources, under the direction of the Proper Officer, the Executive Director Finance and Corporate Resources. The Chief Internal Auditor is positioned at a level in South Lanarkshire Council that enables an internal audit service and responsibilities to be performed without interference from management and establishes the idependence of the internal audit function. The Chief Internal Auditor has direct access and reports administratively to the Executive Director Finance and Corporate Resources, South Lanarkshire Council, the Proper Officer, as defined in Section 95, Local Government Act 1973, meeting with this officer on a regular one to one basis. For the delivery of SLLC audit services, the Chief Internal Auditor reports directly to the Board, via PFAC. The PFAC serves as the audit committee for the organisation and independently provides assurance on the soundness of the control environment and the adequacy of governnace and risk management frameworks in the organisation. The Chief Internal Auditor also has direct access to the SLLC Chief Executive via the Leadership Team representatives and uses this route to report as appropriate.	**C**

		The Chief Internal Auditor confirms to the Board on an annual basis that the internal audit function is organisationally independent. Any factors that impact on independence will be disclosed to the Board along with any issues encountered relating to a limitation of scope, performance or communication of internal audit findings and conclusions. Within South Lanarkshire Council, the Employee Code of Conduct provides guidance on the type and nature of interests that should be declared (including paid employment outside the Council and personal interests in contracts). Auditors declare any interests in accordance with the Code of Conduct and with regard to the audit principle of independence, notifying the Chief Internal Auditor of any conflicts of interest which may arise. This formal declaration is required to be renewed on an annual basis but is revisited should any conflicts arise. This disclosure extends to any impairments of independence either actual or perceived with an expectation that internal auditors act with profesional objectivity in all aspects of the audit engagement, that this results in balanced assessments that considers all facts and circumstances and avoids bias and undue influence. The Chief Internal Auditor is required to report to the audit committee and senior management any potential impairments to independence.	
Domain 1: Purpose, Authority, and Responsibility Principle 3 – Professional Responsibility	Are auditors adhering to ethical standards and professional conduct?	Employees are required to accept the terms of the Council's Code of Conduct as a condition of employment. The Internal Audit team (qualified and part qualified) are members of various professional accountancy bodies with a requirement to adhere to ethical standards and professional conduct.	**C**

		A structured programme of training is in place. Within South Lanarkshire Council, the Employee Code of Conduct provides guidance on the type and nature of interests that should be declared (including paid employment outside the Council and personal interests in contracts). Auditors must declare their interests in accordance with the Code of Conduct and with regard to the audit principle of independence, notify the Chief Internal Auditor of any conflicts of interest which may arise. This formal declaration is required to be renewed on an annual basis but is revisited should any conflicts arise. This disclosure extends to any impairments of independence either actual or perceived with an expectation that internal auditors act with profesional objectivity in all aspects of the audit engagement, that this results in balanced assessments that considers all facts and circumstances and avoids bias and undue influence.	
Domain 2: Governance Principle 4 – Governance Structure	Is there clear oversight by the board or audit committee?	In SLLC, the Leadership team representatives and the Chief Internal Auditor seek to maintain sound working relationships with PFAC and Board members and ensure that good channels of communication are maintained. The Board discusses with the Chief Internal Auditor, the function's mandate in terms of its role, responsibility, scope and services and they review and approve the Internal Audit Mandate and Charter on an annual basis. Members of PFAC and the Board and the Chief Internal Auditor are able to meet privately. Internal Audit report all findings from concluded assignments via progress reports to PFAC. Lines of communication between the Chair of PFAC and the Chief Internal Auditor is open at all times. All members are free to raise concerns directly with the Chief Internal Auditor and input to the Internal Audit Charter and audit	**C**

		plan. Areas suggested for inclusion in the audit plan are assessed in terms of risk prior to any audit work being undertaken. Enquiries from members follow established protocols and guidance. The Board approve a risk-based internal audit plan on an annual basis having satisfied itself around the adequacy of budgets, qualifications and competencies of the internal audit function and of the Chief Internal Auditor to deliver the plan. The Board satisfies itself that a quality assurance and improvement programme has been established and reviews the results of the quality assurance and improvement programme on an annual basis. The Board seek assurances that there has been no limitation in scope or resources and receives regular updates in relation to performance to allow this to be assessed relative to the function's objectives and individual roles and responsibilities.	
Domain 2: Governance Principle 5 – Board Oversight	Does the board approve the audit plan and monitor performance?	The Board discusses with the Chief Internal Auditor the function's mandate in terms of its role, responsibility, scope and services and reviews and approves the Internal Audit Mandate and Charter on an annual basis. The Board approves a risk-based internal audit plan on an annual basis having satisfied itself around the adequacy of budgets, qualifications and comptencies of the internal audit function and of the Chief Internal Auditor to deliver the plan. Any factors that impact on independence are disclosed to the Board along with any issues encountered relating to a limitation of scope, performance or communication of internal audit findings and conclusions.	**C**

		The Board, via PFAC, seek assurances that there has been no limitiation in scope or resources and receives regular updates in relation to performance to allow this to be assessed relative to the function's objectives and individual roles and responsibilities. A suite of performance measures are reported at each meeting of PFAC and to senior management as part of the annual reporting process.	
Domain 2: Governance Principle 6 – Organisational Alignment	Is internal audit integrated into governance processes?	Internal Audit forms part of the Board's wider governance framework. Output from the function is the delivery of a planned programme of internal audit assignments. Each assignment is formally reported to PFAC and, from 1 April 2025, an 'assignment conclusion' (previously an 'audit opinion') expressed based on the level of assurance that testing has provided. These assurances, in turn, inform an overall assessment of the adequacy and effectiveness of the organisation's framework of governance, risk management and control arrangements that is reported annually to the Leadership Team, PFAC and the Board.	**C**
Domain 3: Managing the Internal Audit Function Principle 7 – Internal Audit Strategy	Is there a documented strategy aligned with organisational goals?	A formal Audit Strategy, aligned to SLLC's goals, was presented to the Board alongside the 2025/2026 Plan.	**C**
Domain 3: Managing the Internal Audit Function Principle 8 – Resource Management	Are resources adequate and appropriately skilled?	There are no resourcing constraints that would prevent delivery of the Audit Plan. Training includes regular team briefs, internal training sessions, attendance at professional body conferences and external seminars and briefings and access to online resources.	**C**
Domain 3: Managing the Internal Audit Function Principle 9 – Quality Assurance and Improvement	Is there a QAIP (Quality Assurance and Improvement Programme)?	Quality Assurance and Improvement Programme has been developed and is reported as part of the Internal Audit assurance report.	**C**

Domain 4: Performing Internal Audit Services Principle 10 – Engagement Planning	Are objectives, scope, and criteria clearly defined?	Standard audit remit template that sets out a review of governance, risk management and control processes; the audit objective and scope; testing and sample details; arrangements for the reporting of findings; Audit Staff who will deliver the audit; liaison arrangements; audit timescales and budget.	**C**
Domain 4: Performing Internal Audit Services Principle 11 – Engagement Execution	Are audits conducted in accordance with standards?	Compliant processes have been developed. Audit assignments are planned; risk-based approach and methodology developed; sufficient fieldwork and evidence gathered; clear reporting protocol in place; follow up and monitoring arrangements established and continuous improvement promoted.	**C**
Domain 4: Performing Internal Audit Services Principle 12 – Evidence and Documentation	Is sufficient, appropriate evidence maintained?	Electronic audit files are retained for all assignments.	**C**
Domain 5: Communicating Results and Monitoring Progress Principle 13 – Reporting	Are reports clear, accurate, and timely?	Standard format for all audit reports and reports are subject to review before issue. Target timescales track timeous issue.	**C**
Domain 5: Communicating Results and Monitoring Progress Principle 14 – Follow-up and Monitoring	Are corrective actions tracked and verified?	All actions are logged in a database together with a 'responsible owner' and a due date. Verbal updates are obtained when the action falls due. This is classed as informal follow up and included within routine performance indicators reported to PFAC. Separately, actions are formally followed up to confirm that there is evidence of action being taken and the findings of these reviews reported to PFAC and the Board in the annual assurance report.	**C**
Domain 5: Communicating Results and Monitoring Progress Principle 15 – Continuous Improvement	Is there a process for ongoing improvement?	There is ongoing evaluation of performance (performance indicators); a Quality Assurance and Improvement Programme has been developed; emerging risks are evaluated throughout the year; best practices in audit processes are identified and implemented; promotion of continuous professional development for audit staff and stakeholder engagement to review expectations and alignment with organisational objectives and governance requirements.	**C**

Key audit performance indicators **Appendix Two**

Area	Measure	Target	Actual	Status	Report Ref
Strategic	Audits in the audit plan that align to the SLLC's vision, objectives and top risks	100%	100%	Met	3.3–3.5
Performance	Number of SLLC Services covered by Audit Plan on an annual basis	33%[3]	>33%	Met	3.6
Strategic	Meetings with four Heads of Service and Chief Executive each financial year	1	1	Met	3.7
Strategic	Internal Audit Manager attendance at all meetings of the PFA Committee	100%	80%	Missed[4]	3.9
Strategic	Meeting with members of the PFA Committee (in private and without senior management)	1	1	Met	3.9
Strategic	2024/2025 Annual Internal Audit Report presented to PFA Committee	By August 2025	August 2025	Met	3.9
Strategic	2026/2027 Audit Strategy presented to PFA Committee	Ahead of 2026/2027 IA Plan	February 2026 Committee	Met	3.9
Strategic	2026/2027 Audit Plan presented to PFA Committee	By March 2026	February 2026 Committee	Met	3.9
Operation	Number of 2025/2026 audits completed that comply with the requirements of Global Internal Audit Standards	100%	100%	Met	3.10, 4.6
Strategic	Number of audits where objectivity or independence is impaired	0	0	Met	3.10

[3] Four SLLC services - Corporate Services, Strategy and Governance, Operations and Estates, Business Development. Again, target represents coverage of all services within a rolling three-year Strategic Plan period.
[4] 2025/2026 PFA Committee meetings to date – May 2025 (attended), August 2025 (not attended due to unforeseen absence), October 2025 (attended), February 2026 (attended), May 2026 (attended).

Area	Measure	Target	Actual	Status	Report Ref
Operation	Number of open vacancies in team	0	0	Met	4.2, 7.1
Operation	Employees holding a qualification from a recognised CCAB[5] body or Institute of Internal Auditors	75%	88%	Met	4.2, 7.1
Operation	Number of training days per employee	5	>5	Met	4.2, 7.3
Operation	Number of processes where we use continuous control monitoring	1	1	Met	4.4
Performance	Meetings with Heads of Service offered for each audit[6]	2	2	Met	4.6, 4.7, 4.13
Operation	2025/2026 Plan completed prior to presentation of Annual Assurances Report to the PFA Committee in August 2026.	100%	100%	Met	4.7
Performance	Number of planned assignments that have been deferred to a future year to accommodate unplanned work	0	0	Met	4.8
Performance	2025/2026 audit assignments completed within purchased SLA budget days and all days delivered by the end of the audit year (prior to presentation of Annual Assurance Report to PFAC in August 2026)	100%	100%	Met	4.10
Performance	Draft reports issued by target date	80%	82[7]%	Met	4.11
Performance	Internal Audit recommendations delivered on time	80%	65%[8]	Missed	4.12
Performance	Internal Audit recommendations formally followed up[9]	100%	100%	Met	4.12
Strategic	Opportunity for Service to provide feedback to Internal Audit to assess level of satisfaction with the Service (questionnaire)	Prior to Annual Report	July 2026	Met	4.13, 7.2
Strategic	Number of formal complaints about the Internal Audit Service	0	0	Met	4.13

[5] Consultative Committee of Accountancy Bodies
[6] An opening meeting at the outset of the audit is offered to agree the remit and a closing meeting at the end of the audit is offered to agree the audit report and action plan.
[7] 9/11 – slight delay in issue of cash controls and VFM output beyond expected date, but still prior to issue of this Annual Report.
[8] Seventeen actions fell due for completion in 2025/2026. 11/17 were closed by the due date (65%) with 6/17 (35%) running on beyond the due date as implementation was delayed.
[9] Per agreement that the cash control actions would be formally followed up in 2025/2026 and the overtime actions would be formally followed up in 2026/2027 as the implementation date was only March 2026.

Area	Measure	Target	Actual	Status	Report Ref
Operation	Number of key performance indicators achieved by end of audit year	100%	91%[10]	See PFAC and Audit Actions Delivery	4.14

Definition of Measures

AREA	DEFINITION
Operation	Measures that assess day to day operational targets for the Service
Performance	Measures the effectiveness of the Service in its delivery of core objectives
Strategic	Measures as to how activity aligns to wider organisational objectives

STATUS	DEFINITION
	At year end - target not met
	At year end - target missed (marginally)
	At year end - target met

[10] 21/23 indicators met (PFA attendance and implementation of audit recommendations missed).

Agenda Item
9b

SOUTH LANARKSHIRE
Leisure & Culture

STANDING ORDERS ON CONTRACTS

SLLC Approval: 03 June 2026

Contents

Foreword

These Standing Orders on Contracts have been adapted from the Standing Orders on Contracts of South Lanarkshire Council approved by SLC on 11 September 2024. The references to responsibilities of the SLC Chief Executive and/or appropriate Executive Directors have been largely assigned to the SLLC Chief Executive. Similarly, references to Head of Administration have been assigned to the Board Secretary and/or Head of Corporate Services.

1. DEFINITIONS

The following words and expressions used in these Standing Orders shall have the meanings hereby assigned to them:-

“Board"	means the Board of the SCIO and the expression "Chair" shall be construed accordingly and shall be taken to include any corresponding office known by any other description.
“Call-Off Contract”	means the terms and conditions under which specific purchases can be made under a Framework Agreement and/or a DPS and/or an arrangement established in terms of the light touch regime.
SCIO	means South Lanarkshire Leisure and Culture SCIO and SLL Trading Limited, the first being a Charity registered in Scotland and the second being incorporated under the Companies Acts in Scotland. Both having their registered office at Council Offices,5th Floor, Almada Street, Hamilton, ML3 0EW.
“Chief Executive"	means the Chief Officer of the SCIO for the time being and shall be taken to include any corresponding office known by any other description or any authorised substitute(s) except in cases where it is stated that substitutes cannot act.
"Board Secretary"	means the Board Secretary of the SCIO for the time being and shall be taken to include any corresponding office known by any other description or any authorised substitute(s) except in cases where it is stated that substitutes cannot act.
“Competitive Dialogue”	means a tendering procedure as defined in the European Procurement Regulations.
“Community Benefit Requirement”	means the contractual requirement as defined in the Reform Act and any guidance published by the Scottish Government under the Reform Act.
“Concession”	means a works or services concessions as defined in the Concession Contracts (Scotland) Regulations 2016 or such other Regulations amending, substituting or replacing those regulations.
“Contracting Authorities”	means the authorities or bodies as defined in the European Procurement Regulations and includes the SCIO.
Data Protection Laws	means the General Data Protection Regulation (or any law incorporating the same into UK domestic law with or without amendments and any subsequent legislation amending it) and the Data Protection Act 2018 (or any legislation replacing or amending it)

DPS	means such a dynamic purchasing system as defined in the European Procurement Regulations.
“General Principles”	means the overarching principles which are transparency, openness, non-discrimination and equal treatment.
“E-procurement”	means the carrying out of the procurement of a contract for the supply of goods, carrying out of works or provision of services by electronic means.
“Electronic Auction”	means a repetitive process, involving an electronic device for the presentation of new prices, revised downwards and/or new values concerning certain elements of tenders, which occurs after and initial full evaluation of the tenders enabling them to be ranked using the stated evaluation methods.
“Equal Opportunities”	means the prevention, elimination, or regulation of discrimination between persons on grounds of sex or marital status, on racial grounds, or on grounds of disability, age, sexual orientation, language or social origin or of other personal attributes including religion (or lack thereof), beliefs or opinions such as religious or philosophical beliefs as detailed in the Equalities Legislation.
“Equalities Legislation”	means the Equality Act 2010 and all other relevant statutory obligations in relation to equalities which apply in the UK.
“European Procurement Regulations”	means the Public Contract (Scotland) Regulation 2015 or such other Regulations amending, substituting or replacing those Regulations.
“Framework Agreement”	means any agreement which sets out terms and conditions under which specific purchases (call-off Contracts) can be made throughout the term of the agreement.
"Head of Corporate Services"	means the Head of Corporate Services of the SCIO for the time being and shall be taken to include any corresponding office known by any other description or any authorised substitute(s) except in cases where it is stated that substitutes cannot act.
Higher Value Regulated Procurement	means a procurement exercise subject to European Procurement Regulations
Higher Value Threshold	means the financial thresholds for Higher Value Regulated Procurements which must be reviewed by the Scottish Ministers every 2 years and will apply from 1 January in the relevant year.

“Innovation Partnership”	means that procurement process as specified in the European Procurement Regulations.
“Life-Cycle Costing”	means such costs as specified in the European Procurement Regulations.
“PCS System”	means the Public Contracts Scotland system.
“PIN”	means a prior information notice.
“Practice Notes”	means all practice notes, toolkits, briefing notes and/or documents issued pursuant to **Standing Order 2.8.**
“Procurement Process”	means a procurement process approved by the SCIO in relation to the conduct of a procurement exercise.
“Procurement Strategy”	means the strategy which the SCIO must prepare in accordance with **Standing Order 37.**
“Proper Officer”	means a proper officer authorised to execute deeds on behalf of the SCIO in terms of Section 194 of the Local Government (Scotland) Act 1973 as amended by the Requirements of Writing (Scotland) Act 1995 and any new and/or subsequent amending legislation as detailed in the SCIO’s Scheme of Delegation.
“Reform Act”	means the Procurement Reform (Scotland) Act 2014 and any new legislation amending, substituting or replacing those Regulations.
“Reform Act Regulations 2016”	means the Procurement (Scotland) Regulation 2016 of such other Regulations amending, substituting or replacing those regulations.
“Regulated Procurement”	has the meaning defined in the Reform Act and excludes a Higher Value Procurement unless stated otherwise.
“SME”	means a business or company as defined by the European Commission.
“SPD”	means the Single Procurement Document (Scotland) as specified in the European Procurement Regulation
“Supported Business”	means such businesses as defined in the European Procurement Regulations
“Supported Employment Programme”	means such programmes as defined in the European Procurement Regulations.
“Sustainable Procurement Duty”	means such duty as specified in the Reform Act and any guidance published by the Scottish Government under the Reform Act.

2. GENERAL

These Standing Orders shall apply to the arrangements established by on or behalf of the SCIO in relation to the supply of goods, provision of services and carrying out of works.

2.1 Extent

These Standing Orders apply to all SCIO contracts (as appropriate) including but not limited to the award of contracts, the establishment of Framework Agreements, a DPS and award of Call Off Contracts.

2.2 Internal Arrangements

(a) Any action taken on the SCIO's behalf must also be in terms of the SCIO's Scheme of Delegation and Financial Regulations.

(b) These Standing Orders are intended to comply with and be subject to the Code of Corporate Governance made by the SCIO from time to time. If there is a discrepancy between the terms of these Standing Orders and those of the Code, the provisions of the Code in force at the time shall take precedence.

2.3 Form of contract & Scots Law

(a) Unless otherwise authorised by the Chief Executive in consultation with the Board Secretary and/or Head of Corporate Services in special circumstances, and subject to Standing Order 2.3 (b) all contracts, the establishment of Framework agreements, the establishment of DPS and the award of Call Off Contracts entered into in terms of and in accordance with these Standing Orders shall be:

(i) in writing,
(ii) in the name of the SCIO
(iii) shall be subject to the Law of Scotland and the exclusive jurisdiction of the Scottish Courts.

(b) Approval under **Standing Order 2.3(a)** shall not be required for the award of:-

(iv) Contracts where the estimated values is less than £50,000; and
(v) Call Off Contract irrespective of value which will be subject the law of England and the exclusive jurisdiction of the English Courts where they do no allow for a change in the applicable law and legal jurisdiction.

2.4a Calculation of Contract Values

(i) Any value of a contract stated in these Standing Orders shall be the estimated aggregated value of the contract for the full life of the contract (including any potential contractual extension) and not the estimated annual value of the contract. Where a contract is for the supply of works, goods or services for a continual basis over a number of years then the estimated aggregated value of that contract shall be calculated by multiplying the estimated annual value by the number of years of the duration of the contract. All prizes and/or payments to be made to tenderers must be taken into account in calculating the estimated value.

(ii) For the purposes of determining whether the European Procurement Rules

apply to the procurement exercise VAT (if payable) must be included when calculating the estimated value.

(iii) For the purposes of determining whether the Reform Act applies to the procurement exercise the estimated value should be calculated exclusive of VAT.

(iv) If the estimated value of a contract cannot be calculated, the contract will be subject to the Reform Act/Reform Act Regulations 2016 and European Procurement Regulations

2.4b **Prohibition of Division of Contract Values**

It is not permitted to deliberately divide any procurement exercise into two or more contracts if the intention for doing so is to reduce the estimated aggregated value of the contract in order to avoid the application of any financial threshold set out in these Standing Orders, the application of the Higher Value Thresholds or the effect of the European Procurement Regulations.

2.4c **Calculation of Contract Value – Match Funding**

If a cost of a contract is only being met in part by the SCIO the total value of the contract including the funding from a third party shall be, for the purposes of these Standing Orders, calculated by totalling all the contributions to be made towards the cost.

2.4d **Calculation of Contract Value – Funding in Kind**

Where a contract includes the provision of services or other funding in kind to the Contractor by either the Company or a third party, the value of the contract shall be calculated by including the value of the services being provided or the funding in kind in addition to any monetary consideration.

2.4e **Mixed Procurement**

The following rules will apply when determining how to treat a mixed procurement of any contract for the supply of goods, provision of services and carrying out of works:-

(i) Services/Supplies
Determining factor is the main subject matter identified by reference to the element which has the highest estimated value ie if the value attributed to services exceeds that attributable to supplies then it will be treated as a services contract.

(ii) Services/Social and specific Services
Determining factor is the main subject matter identified by reference to the element which has the highest estimated value is if the value attributed to services exceeds that attributable to the Social and Specific Services then it will be treated as a services contract.

(iii) Concession/Works Services and/or Supplies
If the estimated value of the works/services/supplies element exceeds the relevant Higher Value Thresholds it will be treated as a public contract for works/services/supplier and not a concession contract.

(iv) Works/Services or Supplies
Determining factor is the main subject of the contract in question regardless of the relative values of the elements and then the relevant higher Value

Threshold applies to determine the applicable rules.

2.4f **Franchises**

Where a Contract relates to the provision of services to the public under which the SCIO gives to the Contractor the right to exploit the provision of the services, the total value of that Contract shall be taken as including the value of that right to exploit the provision and monetary payments made by the SCIO to the Contractor. All sums paid by the Contractor to the SCIO shall be disregarded in connection with the calculation of the value of the Contract.

2.5 **Signing**

All contracts entered into in terms of and in accordance with these Standing Orders shall be signed by the Chief Executive and/or Board Secretary and the Chair of the Board depending upon the said contract value.

2.6 **Best Value**

All contracts must secure Best Value and maintain an appropriate balance among:

- the quality of the performance of the SCIO's functions;
- the cost to the SCIO of that performance; and
- the cost to persons of any SCIO service provided for them on a wholly or partly rechargeable basis.

having regard to:

(a) efficiency;
(b) effectiveness;
(c) economy;
(d) the need to meet equal opportunity requirements, and
(e) the need to ensure sustainable development.

2.7 **Guidance**
When entering into a contract, due regard must be given to any guidance issued by the Scottish Ministers in terms of the Local Government in Scotland Act 2003 and/or Reform Act.

2.8 **Practice Notes**
Practice Notes on tendering procedures for any contract or type of contract entered into by or on behalf of the SCIO may be issued by the Board Secretary and/or the Head of Corporate Services. Any Practice Notes shall form part of these Standing Orders.

2.9 **Prohibition on anti-competitive contract terms**

In preparation of any contract terms and in the award of any contract, there must be no terms which are either:

(a) anti-competitive as defined in the Competition Act 1998 (where applicable), or
(b) non-compliant with any other legal requirement.

2.10 **Compliance with General Principles**

All contracts regardless of value and/or applicable procurement rules, must be awarded in compliance with the General Principles.

2.11 **Conflict of interest**

In carrying out all procurement exercises employees must comply with the measures introduced by the SCIO to prevent, identify and remedy conflicts of interest as specified in the relevant Procurement Process.

3. EXEMPTIONS AND PARTIALLY EXEMPT CONTRACTS

3.1 **Estimated Cost Below £5,000**

These Standing Orders shall not apply to any contract for the supply of goods, the provision of services and the carrying out of works where the estimated aggregated value does **not exceed £5,000** including items of a recurring nature the **total** value of which is no more than that amount, subject always when entering into such contracts:

(a) to the need to demonstrate Best Value (as set out in **Standing Order 2.6**) and
(b) compliance with the SCIO's Code of Corporate Governance and
(c) ordered using the SCIO's official Purchasing Order and the Oracle Fusion system (unless otherwise exempted by the SCIOs Certified Payment Policy
(d) Seeking at least 3 quotes (including one from SME having their place of business within the local government area of South Lanarkshire). Place of business does not require it to be their registered or principal office; and
(e) Keeping records of the process.

3.2 **Estimated Cost Between £5,000 and £50,000 for supplies and provision of Services and £5,000 and £2 million for the execution of works**

(a) All contracts for the supply of goods, carrying out of works or provision of services, where the estimated aggregate value does **not exceed £50,000**, and for carrying out of works where the estimated aggregated value **does not exceed £2 million** shall be exempted from these Standing Orders with the exception of:

(i) **Standing Order 2 (General)**
(ii) **Standing Order 4.2 (Contract Reference Number)**
(iii) **Standing Order 4.3 (Sourcing Strategy)** (if, in the opinion of the Head of Corporate Services, the contract is of high risk and/or there are special circumstances)
(iv) **Standing Order 4.14 (Community Benefit Requirement)** but only for works contracts where the estimated value exceeds £50,000 and is being awarded on the basis of most economically advantageous tender
(v) **Standing Order 16 (Assurances – Tendering)** (as appropriate)
(vi) **Standing Order 16A (Compliance with Data Protection Laws)** (as appropriate)
(vii) **Standing Order 17 (Confidentiality and Requests for Information)**
(viii) **Standing Order 18 (E-Procurement)**
(ix) **Standing Order 19 (Selection of Tenderers)** but only for works contracts where the estimated value exceeds £50,000
(x) **Standing Order 20 (Checking of Pre-Qualification Responses/Tenders and Reporting)** but only for works contracts where the estimated value exceeds £50,000

(xi) **Standing Order 21 (Acceptance of Tenders)** but only for works contract where estimated value exceeds £200,000
(xii) **Standing Order 25 (Contract Performance Security)**; and
(xiii) All Standing Orders relating to contract conditions.

(b) Immediately prior to entering into a contract referred to in Standing Order 3.2(a) at least 5 competitive quotes in writing (including ~~2 –~~ 4 quotes from SMEs having their place of business within the local government area of South Lanarkshire if such SMEs are available and place of business does not require to be their registered or principal office) must be obtained by the Board Secretary and/or Head of Corporate Services using Quick Quote via Public Contracts website (route 1A – lowest price) or PCS system (route B – most economically advantageous) unless the Board Secretary and/or Head of Corporate Services is satisfied that:

(i) good reasons exist for not doing so. Such good reasons may include but are not limited to the circumstances justifying the use of the negotiated tendering procedures as set out in **Standing Order 9 (Negotiated Tendering Procedure – General)**, and

(ii) the contract secures Best Value (as set out in **Standing Order 2.6).**

(iii) the contract awarded must include a condition which allows for it to be reviewed as a minimum annually to ensure Best Value (as set out in Standing Order 2.6)

(iv) The Board Secretary and/or Head of Corporate Services shall ensure that the persons invited to submit quotations are selected on a fair, transparent and non-discriminatory basis, and in a manner that at all times compliant with the General Principles following a selection process approved by the Head of Corporate Services.

3.3 **Conditions of Funding**

Where a public authority or similar body provides funding for a particular project (including the provision of services by the SCIO to others) and that funding is subject to conditions which specify:

(i) particular contractors or a particular class of contractor with whom/which the SCIO is required to or restricted to contract with in the provision of such services or carrying out of the works as part of the project, or

(ii) specific goods or materials which must be used in the project or specific services which must be delivered as part of the project such contracts may be excluded from these Standing Orders, with the exception of:

(i) Standing Order 2 (General),
(ii) Standing Order 4.2 (Contract Reference Number),
(iii) Standing Order 4.3 (Sourcing Methodology),
(iv) Standing Order 16 (Assurances – Tendering),
(v) **Standing Order 16A (Compliance with the Data Protection Laws)** (if appropriate)
(vi) Standing Order 17 (Confidentiality and Requests for Information),
(vii) Standing Order 18 (E-procurement)

(viii) **All Standing Orders** relating to contract conditions.

In so far as the said funding condition makes, in the view of the Chief Executive the tendering processes set out in these Standing Orders impracticable or impossible, subject always to the requirements of the Reform Act , the Reform Act Regulation 2016 and/or the European Procurement Regulations.

3.4 **Employment**

These Standing Orders do not apply to any contract of employment.

3.5 **Land**

These Standing Orders do not apply to any contract for the acquisition or disposal or rental of heritable property (including leases and licences) or any right, servitude or other interest in or over heritable property. However, this does not exempt any acquisition or disposal from the European Procurement Regulations or any other requirements set out in law or from the SCIO's Scheme of Delegation, Financial Regulations in relation to the acquisition or disposal of land or buildings.

3.6 **Special Circumstances**

The SCIO may exempt from the terms of these Standing Orders or any part of them as the case may be, any contract if, subject to any requirements in terms of the European Procurement Regulations and following consultation with the SCIO Board Secretary and/or Head of Corporate Services they are satisfied that the exemption is justified by special circumstances.

3.7 **Contracts between public sector entities – Teckel and Hamburg exemptions**

(a) These Standing Orders do not apply to the procurement for the award of contracts on the basis of the 'Teckel' exemption (where a contract is awarded by a Contracting Authority to a controlled legal person (as defined in the European Procurement Rules) or the 'Hamburg' exemption (where a contract is awarded exclusively between 2 or more Contracting Authorities) with the exception of:-
(i) **Standing Order 2.5 (Signing)**
(ii) **Standing Order 4.2 (Contract Reference Number)**

(b) The approval of the Chair of the Board will be required to award contracts in the circumstances referred to in **Standing Order 3.7(a)**

4. PRE-TENDER REQUIREMENTS

4.1 **Approval of estimates of contract values**

No tender shall be invited or offer made or accepted for any contract for the supply of goods or the carrying out of works or the provision of services unless either:

(a) appropriate financial provisions have been made and approved by the SCIO's Financial Regulations, or

(b) where funding is provided by a third party for a specific purpose involving the award of contracts of whatever nature, that purpose has been approved by the

Company.

4.2 **Contract Reference Number**

No tender shall be invited or offer made or accepted for any contract for the supply of goods, or the carrying out of works or the provision of services where the estimated aggregated value exceeds £5,000 without a contract reference number having been obtained from the Board Secretary and/or Head of Corporate Services.

4.3 **Sourcing Strategy**

(a) A Sourcing Strategy using the template approved by the Head of Corporate Services must be created for all:-

(i) tender opportunities including the setting up of a Framework Agreement in accordance with **Standing Order 12 (Framework Agreement – internal);** a DPS under **Standing order 12A (DPS-Internal);** and

(ii) Call Off Contracts from a Framework Agreement permitted in terms of **Standing Order 13 (Framework Agreement – External)** or a DPS permitted in terms of **Standing Orders 13A (DPS-External)** where the estimated aggregated value exceeds £50,000 for the supply of goods or the provision of services and exceeds £2million for the execution of works.

A Sourcing Strategy may be created for contracts where the estimated aggregated value is below £50,000 for the supply of goods or provision of services and below £2million for the execution of works, where in the opinion of the appropriate Head of Service the contract is of high risk and/or there are special circumstances.

(b) However a Sourcing Methodology will not require to be created for:-

(i) Call Off Contracts from a Framework Agreement established by the SCIO in accordance with **Standing Order 12 (Framework Agreement – Internal)** unless, in the opinion of the appropriate Head of Service, that Call Off Contract is of high value and/or high risk; or

(iii) Call Off Contracts from a DPS established by the SCIO in accordance with Standing Order 12A (DPS – Internal) unless, in the opinion of the appropriate Head of Service, that Call Off Contract is of high value and/or high risk; or

(iv) the procurement of a contract using the negotiated tendering procedure in accordance with Standing Order 9 (Negotiated Tendering Procedure – General); or

(v) Call Off Contracts awarded as a direct award from a Framework Agreement permitted in terms of Standing Order 13 (Framework Agreement – External) and established by the Scottish Government or Scotland Excel as a single supplier Framework Agreement.

4.4 **Board Authority**

Where, in the opinion of the Chief Executive, a contract for the supply of goods, the carrying out of works or the provision of services is of high value and/or high risk no tender shall be invited for such contract without approval from the Board.

4.5 **Selection and Award Criteria**

4.5.1 **Selection Criteria**

(a) The Board Secretary and/or Head of Corporate Services will set the selection criteria for a procurement exercise taking account of the applicable requirements of:

- the Reform Act Regulations ~~2016~~
- any other Regulation made or guidance issued by the Scottish Government under the Reform Act
- The European Procurement Regulations
- Any such guidance as the Board Secretary and/or Head of Corporate Services considers appropriate; and
- Any relevant Procurement Process

(b) The selection criteria must be:

- proportionate taking account of the nature, scope and size of the contract, and
- related to the subject matter of the contract.

(c) The selection criteria must be stated in the contract notice or the invitation to confirm interest and the procurement document to enable the bidder to complete and submit an SPD (refer to **Standing Order 19.6)**.

4.5.2 **Award Criteria**

(a) The procurement documents will state the award criteria that will apply to the procurement exercise as follows:

(i) The award of a contract for services and supplies with an estimated value above £50,000 shall be made on the basis of the most economically advantageous tender;

(ii) The award of a contract for works with an estimated value above £50,000 and below £2,000,000 shall be made, at the discretion of the Board Secretary and/or Head of Corporate Services, on the basis of lowest price or most economically advantageous tender;

(iii) The award of a works contract where the estimated value exceed £2,000,000 shall be on the basis of the most economically advantageous tender, and

(iv) The award of all contracts which exceed the relevant Higher Value Thresholds shall be made on the basis of the most economically advantageous tender.

(b) The most economically advantageous tender must be identified on the basis of the best – price quality ratio assessed on the basis of criteria linked to the subject matter of the contract and include price or cost. This requirement applies even if the cost element ~~may~~ takes the form of a fixed price or cost. The cost element may also at the discretion of the Board Secretary and/or Head of Corporate Services include Life-Cycle costing.

(c) In determining the award criteria the Board Secretary and/or Head of Corporate

Services must take account of the requirements of the European Procurement Regulations, any such guidance felt appropriate and any relevant Procurement Process.

4.6 **Reserved Contracts**

The Board Secretary and/or Head of Corporate Services may in respect of a Regulated Procurement or an EU Regulated Procurement:

(i) reserve the right to participate in a procurement exercise to a Supported Business, or

(ii) provide for a contract to be performed in a Supported Employment Programme and the decision must be recorded in the Sourcing Strategy .

4.7 **Preliminary Market Testing**

(a) Preliminary market consultation may be carried out at the discretion of the Board Secretary and/or Head of Corporate Services before carrying out any procurement exercise.

(b) Advice may be sought or accepted from an independent expert or authority or from persons operating in the particular market relevant to the subject matter of the contract to be procured. That advice may be used in the planning and conduct of the procurement exercise provided that it does not distort competition or breach the General Principles.

(c) Employees involved in a procurement exercise where preliminary market consultation has been conducted must comply with the provision of the relevant Procurement Process and ensure that the information is disclosed in the tender documents issues for the procurement process.

4.8 **Time Limits**

(a) For all procurement exercises other than those subject to the European Procurement Regulations the time limits for the receipt of tenders or requests to participate shall be determined taking account of the following factors:

(i) the complexity of the contract; and/or
(ii) the time required for preparing a tender; and/or
(iii) whether a site visit is required.

(b) The time limit for receipt of tenders must be extended in a proportionate manner where:

(i) the Company supplies additional information to a bidder (whether or not it was requested in good time) less than 6 days before the expiry of the tender return date, and
(ii) significant changes had been made to the procurement documents.

(c) An extension to the tender return date is not required in the following circumstances:

(i) where the additional information has not been requested in good time, or

(ii) where the additional information requested is of insignificant importance to the tender response.

(d) For any procurement exercise where the estimated value is below the relevant Higher Value thresholds the Board Secretary and/or Head of Corporate Services can decide as good practice to follow the time limits provided in the European Procurement Regulations.

4.9 **Variant Bids**

The Board Secretary and/or Head of Corporate Services must authorise the allowing or seeking of variant bids in a procurement exercise and the decision must be recorded in the Sourcing Strategy.

4.10 **Division of Contracts Into Lots**

(a) Where the Board Secretary and/or Head of Corporate Services decides not to divide a contract into lots the main reasons for that decision must be indicated in the Sourcing Strategy, procurement document and the Report on Tenders.

(b) Where the Board Secretary and/or Head of Corporate Services had decided to divide the contract into lots the Contract Notice or invitation to confirm interest must indicate:

(i) whether tenders may be submitted for one, several or all lots;
(ii) where a decision to limit the number of lots that may be awarded to one tender has been taken by the Board Secretary and/or Head of Corporate Services, the maximum limit of all lots that may be awarded to one bidder;
(iii) the criteria that will apply to determine how lots will be awarded where the award criteria would result in one tenderer being awarded more lots than the maximum number, and
(iv) whether the SCIO reserves the right to award the contract by combining several or all lots if a tenderer can be awarded more than one lot and if so indicate that the lots are groups of lots that may be combined.

4.11 **Examining tenders before checking compliance with selection criteria**

(a) In an open tendering procedure the Board Secretary subject to the prior approval of the Head of Corporate Services, may decide to evaluate tenders before checking the absence of the exclusion grounds and checking a tenderer's compliance with the selection criteria.

(b) If the option referred to in **Standing Order 4.11(a)** is approved:-

(i) the decision must be recorded in the Sourcing Strategy and
(ii) the procurement exercise must comply with the European Procurement Regulations and such guidance and requirements as the Board Secretary and/or Head of Corporate Services considers appropriate.

4.12 **Sustainable Procurement Duty**

(a) From 1 June 2016 in carrying out any Regulated Procurements or any Regulated Procurement (other than Call Offs) or Higher Value Regulated Procurement the Board Secretary and/or Head of Corporate Services will comply with the Sustainable

Procurement Duty.

(b) In complying with the Sustainable Procurement Duty the Board Secretary and/or Head of Corporate Services must comply with the Reform Act, any guidance issued by the Scottish Government under the Reform Act, any guidance and requirements as the Board Secretary and/or Head of Corporate Services considers appropriate and any relevant Procurement Process.

(c) In complying with the Sustainable Procurement Duty the Board Secretary and/or Head of Corporate Services will so far as possible within the law encourage fair work practices and payment of the living wage and discourage use of exploitative 'zero hours'contracts.

4.13 **Community Benefit Requirement**

(a) From 1 June 2016 in carrying out any Regulated Procurement or Higher Value Regulated Procurement (including any Call Off Contract) where the estimated value of the contract is equal to or exceeds £4million the Board Secretary and/or Head of Corporate Services will comply with the Community Benefit Requirement.

(b) In complying with the Community Benefit Requirement the Board Secretary and/or Head of Corporate Services must comply with the Reform Act, any guidance issued by the Scottish Government under the Reform Act, any guidance and requirements considered appropriate and any relevant Procurement Process.

(c) In addition to complying with the Community Benefit Requirement the Board Secretary and/or Head of Corporate Services must, in carrying out all relevant procurement exercises where the estimated value is in excess of £50,000(with the exception of contracts for the execution of works where the estimated value of is less than £2million and the contract will be procured via quick quote (Route 1A – lowest price)) comply with the Company's policy of promoting community benefits and any relevant Procurement Process.

4.14 **Compliance with Procurement Strategy**

The Board Secretary and/or Head of Corporate Services shall carry out all Regulated Procurements and Higher Value Regulated Procurements, so far as reasonably practicable, in accordance with the Procurement Strategy applicable to the financial year during which the procurement exercise commenced.

4.15 **Procurement of Recycled and recyclable products**

The Board Secretary and/or Head of Corporate Services shall comply with requirements to procure recycled and recyclable products as contained in any Regulations made by the Scottish Government under the Reform Act, any such guidance the Board Secretary and/or Head of Corporate Services consider appropriate and any relevant Procurement Process.

5. COMPETITION REQUIREMENT

5.1 Contracts over £50,000 for goods and services and over £2million for works subject to competition

All contracts for the supply of goods or the provision of services where the estimated aggregated value is equal to or in excess of £50,000 and contracts for the execution of works where the estimated aggregated value is equal to or in excess of £2million but in all cases or below the Higher Value thresholds (refer to **Standing Order 15 (European Procurement Regulations)** may only be awarded after steps have been taken for the purpose of ensuring genuine competition by public advertisement in accordance with the requirements of these Standng Orders.

5.2 Exceptions to the Competition Requirement

The requirement in **Standing Order 5.1** does not apply where the use of the negotiated tendering procedure under the **Standing Order 9 (Negotiated Tendering Procedure – General)** is justified

5.3 Publication of Notices

All PINs, contract notices and contract award notices must be published via the Public Contracts website , Find a Tender system and OJEU (if applicable) in accordance with applicable provisions of the European Procurement Regulations, the Reform Act, the Reform Act Regulations 2016, any other Regulations made by the Scottish Government under the Reform Act and any guidance issued by the Scottish Government under the Reform Act and any guidance issued by the Scottish Government under the Reform Act.

6. RESTRICTED TENDERING

6.1 Period for seeking expressions of interest

The requirement of **Standing Order 4.8** shall be complied with in determining the period allowed in the PIN (when used as a call for competition) or the contract notice to express an interest in tendering for a proposed contract.

6.2 Obtaining Assurances

Prior to issuing any invitations to tender, the Board Secretary and/or Head of Corporate Services shall seek the assurances required by **Standing Order 16.1** but only insofar as they relate to the subject matter of the contract.

6.3 Invitation to tender

Invitations to tender shall be sent to at least five persons selected from those who have expressed an interest in tendering for the proposed contract or, if fewer than five persons have expressed an interest to all such persons who have done so. However, no person shall be invited to tender unless:

(a) they have provided the assurances required in terms of **Standing Order 6.2;**

(b) the technical capability and financial standing of such persons has been satisfactorily investigated;

(c) the requirements of **Standing Order 19 (Selection of Tenderers)** have been complied with, and

(d) the Company has complied with the requirements of **Standing Order 16A(Compliance with Data Protection Laws).**

7. OPEN TENDERING

7.1 Time Limit

The requirements of **Standing Order 4.8** shall be complied with in determining the period allowed in the contract notice for the submission of tenders.

7.2 Obtaining Assurances

All documents detailing the selection criteria will specify that the selection will include the obtaining by the SCIO of satisfactory assurances in terms of **Standing Order 16.1 (Assurances – Tendering)** and comply with the requirements of **Standing Order 16A (Compliance with the Data Protection Laws).**

8. LISTS OF APPROVED CONTRACTORS

8.1 External Lists

Not applicable.

9. NEGOTIATED TENDERING PROCEDURE – GENERAL

9.1 Use of Negotiated Tendering Procedure

This Standing Order shall apply to all Regulated Procurements which are conducted without advertisement, contracts for carrying out works where the estimated value is less than £2million and all Higher Value Procurements under Standing Order 15.2.

9.2 Conditions for using Negotiated Procedure

The negotiated tendering procedure may only be used if:

(a) the circumstances set out in **Standing Order 9.3** exist;
(b) it is in the SCIO's interest to use the negotiated tendering procedure, and
(c) the contract will secure Best Value (as set out in **Standing Order 2.6**); and
(d) all relevant requirements of these Standing Orders have been complied with including but not limited to:-
   (i) **Standing Order 2 (General)**
   (ii) **Standing Order 4.2 (Contract Reference Number)**
   (iii) **Standing Order 16 (Assurances – Tendering)**
   (iv) **Standing Order 19.1 to 19.6 (Selection of Tenderers)**
   (v) **Standing Order 21.1, 21.2, 21.3, 21.5, 21.6 (as appropriate), 21.8 and 21.12 (Acceptance of Tenders)**

9.3.1 Circumstances where Negotiated Procedure is Permitted (Below Higher Value Thresholds)

The Chief Executive, in consultation with the Chair (or in his/her absence) the Acting Chair of the Board must approve the existence of the following circumstances:

(a) Where as a result of the publication of a contract notice, no tender, no suitable tenders, no requests to participate or no suitable requests to participate have been received provided that the initial conditions of the contract are not substantially altered, or

(b) Where the works, services or supplies can be supplied only by one suitable contractor for any of the following reasons:
   (i) The aim of the procurement is the acquisition of a unique work of art or artistic performance;
   (ii) Competition is absent for technical reasons, or
   (iii) the protection of exclusive rights included intellectual property rights but in the cases of (ii) and (iii) no alternative or substitute exists and the absence of competition is not a result of an artificial narrowing down of the parameters of the procurement.

(c) Where in the case of a supplies contract for additional deliveries by the original supplier intended as a partial replacement of supplies or installations or as the extension of existing supplies or installations that a change of supplier would oblige the SCIO to acquire supplies having different technical characteristics which would result in incompatibility or disproportionate technical difficulties in operation and maintenance subject the duration of the contract not exceeding 3 years unless exceptional circumstances exist; or

(d) Where in the case of a contract for the supply of goods, the goods are manufactured purely for the purpose of research, experiment, study or development, but the contract awarded shall not include quantity production to establish their commercial viability or to recover research and development costs; or

(e) Where in the case of a supplies contract, it is in the interests of the SCIO to take advantage of a particularly advantageous terms available from a supplier which is definitively winding up its business activities or from a liquidator in an insolvency procedure, an arrangement with creditors or a similar procedure under national laws or regulation; or

(f) Where in the case of a supplies contract the supplies are quoted and purchased on a commodity market;

(g) Where in the case of a services contract it follows a design contest organised in accordance with the European Procurement Regulations and is to be awarded under the rules provided in the design contest to the winner or one of the winners of the design contest, or

(h) Where:

   (i) It is new works, services or both consisting of the repetition of similar works or services entrusted to the original contractor provided such works or services are in conformity with the project for which the original contract was awarded;

   (ii) project indicated the extent of the possible works or services and the conditions under which they would be awarded;

   (v) the possible use of this procedure was disclosed in the procurement

documents and the total estimated cost of the additional works or services was taken into account in determining if the procurement exercise would be a Regulated Procurement, or

(vi) no more than 3 years has passed from the conclusion of the original contract.

9.3.2 In the view of the Chief Executive (but only if it is strictly necessary) for reasons of extreme urgency either brought about by events outwith the control of the SCIO or to prevent danger to life, serious risk to health or damage to property contract must be awarded without delay

9.4 **Reporting to Board**

Where the negotiated tendering procedure has been used, the requirements of **Standing Order 21.8** shall be met.

9.5 **Keeping Records**

In all cases where the negotiated procedure has been used in terms of this Standing Order, a full written record of all contacts, discussions and communications with the prospective contractors shall be kept by the Chief Executive together with a full explanation as to why the Chief Executive considered it appropriate to use the negotiated procedure and confirming that the contract secures Best Value (as set out in **Standing Order 2.6).**

10. NEGOTIATED TENDER PROCEDURE – SOCIAL CARE CONTRACTS

10.1 Not applicable.

11. COMPETITIVE DIALOGUE

11.1 **Board Approval**

The Competitive Dialogue Procedure provided for in the European Procurement Regulations may only be used where the prior approval of the Board has been given to its use.

11.2 **Use of Competitive Dialogue Procedure**

The use of the Competitive Dialogue Procedure in any contract approved by the Board shall be subject to the European Procurement Regulations and such guidance and requirements as the Board Secretary and/or Head of Corporate Services considers appropriate.

11.3 **Prizes/Payments**

The provision of prizes and/or the making of payment to participants in a Competitive Dialogue Procedure shall be subject to the approval of the Board Secretary and/or Head of Corporate Services.

11A **Innovation Partnerships**

11A.1 **Board Approval**

An Innovation Partnership provided for in the European Procurement Regulations may only be used where the prior approval of the Board has been given to its use.

11A.2 **Use of Innovation Partnership**

The use of an Innovation Partnership shall be subject to the European Procurement Regulations and such guidance and requirements as the Board Secretary and/or Head of Corporate Services considers appropriate.

11B **Competitive Procedure with Negotiation**

11B.1 **Approval**

The Competitive Procedure with Negotiation provided for in the European Procurement Regulations may only be used when the prior approval of the Board Secretary and/or Head of Corporate Services has been given to its use.

11B.2 **Use of the Procedure**

The use of the Competitive Procedures with Negotiation in any contract shall be subject to the European Procurement Regulations and such guidance and requirements as the Board Secretary and/or Head of Corporate Services considers appropriate.

12. FRAMEWORK AGREEMENTS – INTERNAL

12.1 **Framework Agreements – General**

Framework Agreements established by South Lanarkshire Leisure and Culture (SLLC) must be formed on the basis of SLC's Standing Orders, and the applicable provisions of the Reform Act, the Reform Act Regulations 2016, any other Regulation made or Guidance issued by the Scottish Government and/or the European Procurement Regulations (if appropriate).

12.2 **Framework Agreements – Conditions**

All Framework Agreements established by South Lanarkshire Leisure and Culture will define:

(i) The terms and conditions that will apply to any Call Off Contract awarded from the Framework Agreement;

(ii) The procedures to be followed in awarding a Call Off Contract either via direct award from or carrying out a mini competition under the Framework Agreement;

(iii) The maximum period for the Framework Agreement (which must not exceed four years except in exceptional circumstances which relate to the subject matter of the Framework Agreement), and

(iv) The maximum period for any Call Off contract awarded under the Framework Agreement.

12.3 **Framework Agreements – Calling Off**

Any Call Off Contract to be made under a Framework Agreement (either as a direct

award of following a mini-competition) must comply with:

(i) the procedures specified in the Framework Agreement for the making of such a Call Off Contract;

(ii) be awarded using the criteria used to establish the Framework Agreement or as laid down in the Framework Agreement;

(iii) where the estimated aggregated value of a Call Off Contract exceeds £50,000 the following requirements must be complied with:

(i) **Standing Order 4.2 (Contract Reference Number);**
(ii) **Standing Order 4.3 (Sourcing Strategy)** (if in the opinion of the Board Secretary and/or Head of Corporate Services the Call Off Contract is of high value and/or high risk)**;**
(iii) **Standing Order 4.14 (Community Benefit Requirement);**
(iv) **Standing Order 18 (E-Procurement)**(where carrying out a mini-competition);
(v) **Standing Order 20 (Checking of Pre-Qualification documents/Tenders and Reporting)**
(vi) **Standing Order 21 (Acceptance of Tenders)** unless a direct award is being placed via Oracle Fusion or from an electronic catalogue on Oracle Fusion;
(vii) **Standing Order 21.12 (Acceptance or Tenders – Contract Award notices)** (for Regulated Procurements); and
(viii) **Standing Order 25 (Contract Performance Security)** (as appropriate).

12.4 **Framework Agreements – Access by other Contracting Authorities**

A Call Off contract under a Framework Agreement established in terms of this Standing Order may only be made by those Contracting Authorities clearly identified for that purpose in the PIN/contract notice.

12A **DPS – Internal**

12A.1 DPS – General

A DPS established by South Lanarkshire Leisure and Culture must be formed on the basis of these Standing Orders and the applicable provision of the Reform Act, the Reform Act Regulation 2016, and any other Regulations made or Guidance issued by the Scottish Government under the Reform Act, and/or the European Procurement Regulations (if appropriate).

12A.2 DPS – conditions

A DPS established by South Lanarkshire Leisure and Culture in terms of this Standing Order must set out:-
(i) the terms and conditions that will apply to any Call Off Contract awarded from the DPS; and
(ii) the procedures to be followed in carrying out a mini-competition and awarding a Call Off Contract under the DPS.

12A.3 DPS – Calling Off

Any Call off Contract to be made under a DPS established under this Standing Order

must comply with:

- The procedures specified in the DPS for the making of such a Call Off Contract,
- be awarded using the criteria used to establish the DPS or as laid down in the DPS; and
- where the estimated aggregated value of a Call Off Contract exceeds £50,000 the following requirements must be complied with:-
  - (i) **Standing Order 4.2 (Contract Reference Number);**
  - (ii) **Standing Order 4.3 (Sourcing Strategy)** (if in the opinion of the Board Secretary and/or Head of Corporate Services the Call Off Contract is of high value and/or high risk)**;**
  - (iii) **Standing Order 4.14 (Community Benefit Requirement);**
  - **(iv) Standing Order 18 (E-Procurement)** (where carrying out a mini-competition);
  - **(v) Standing Order 20 (Checking of Pre-Qualification documents/Tenders and Reporting)**
  - **(vi) Standing Order 21 (Acceptance of Tenders)** unless a direct award is being placed via the e-procurement system and from an electronic catalogue on the e-procurement system;
  - **(vii) Standing Order 21.12 (Acceptance or Tenders – Contract Award notices)** (for Regulated Procurements); and
  - **(viii) Standing Order 25 (Contract Performance Security)** (as appropriate).

13. FRAMEWORK AGREEMENTS – EXTERNAL

13.1 Framework Agreements – General

(a) The Standing orders do not apply to Call Off contracts to be awarded by the SCIO using Framework Agreements made by other organisations, including but not restricted to the Scotland Excel, Procurement Scotland, The Crown Commercial Service or any other public sectors organisation who have made specific provision for collaboration with or allow the use by the SCIO in their Framework Agreements, subject to **Standing Order 13.2 and 13.3.**

(b) The SCIO shall not seek offers for contracts which these organisations are entitled to seek on the SCIO's behalf, except in such cases as the SCIO deems it likely that Best Value (as set out in **Standing Order 2.6**) will be obtained by seeking tenders by other means, or as otherwise permitted by the Framework Agreements. All such Framework Agreements must permit the SCIO to obtain tenders independent of the Framework Agreement if it is likely to be in the interests of Best Value (as set out in **Standing Order 2.6**) to do so.

13.2 Framework Agreements – Conditions

Standing Order 13.1 only applies to Framework Agreements which have been formed on the basis of competitive tenders and in full compliance with any legal requirements such as the duty to promote the Equal Opportunities, General Principles, the requirements of the Reform Act, Reform Act Regulations and/or European Procurement Regulations (if applicable) and provided that the Framework Agreement contains or allows any Call Off contract awarded under this **Standing Order 13** to contain the following matters:

(i) **Standing Order 2.3(Form of Contract and Scots Law)**
(ii) **Standing Order 2.6 (Best Value)**

(iii) **Standing Order 16A (Compliance with the Data Protection Laws)**
(iv) **Standing Order 17 (Confidentiality and Requests for Information)**
(v) **Standing Order 18 (E-Procurement);** and
(vi) where appropriate, all **Standing Orders** relating to contract conditions

13.3 **Framework Agreements – Procedure for Calling Off**

Any Call Off Contract to be made under an external Framework Agreement (either as a direct award or following a mini-competition) must comply with:

(a) the procedures specified in the Framework Agreement for the making of such a Call Off Contract
(b) be awarded using the criteria used to establish the Framework Agreement or as laid down in the Framework Agreement and
(c) where the estimated aggregated value of a Call Off Contract exceeds £50,000 the following requirements must be complied with:-
(i) **Standing Order 4.2 (Contract Reference Number)**;
(ii) **Standing Order 4.3 (Sourcing Methodology)** unless Call off Contract is being awarded as a direct award from a single supplier Framework established by the Scottish Government or Scotland Excel;
(iii) **Standing Order 4.14 (Community Benefits Requirement)**;
(iv) **Standing Order 18 (E-Procurement);**
(v) **Standing Order 20 (Checking of Tenders and Reporting)**;
(vi) **Standing Order 21 (Acceptance of Tenders)** unless a direct award is being placed via the e-procurement system and from an electronic catalogue on the e-procurement system, and
(vii) **Standing Order 21.12 (Acceptance of Tenders – Contract Award Notices)** (For Regulated Procurements); and
(viii) **Standing Order 25 (Contract Performance Security)** (as appropriate).

13A DPS – External

13A.1 DPS – General

(a) The Standing Orders do not apply to Call off Contracts to be awarded by the SCIO using a DPS established by other organisation, including but not restricted to the Scotland Excel, Procurement Scotland, the Crown Commercial Service or any other public sector organisation who have made specific provision for collaboration with or allow their use by the SCIO in DPS set up by South Lanarkshire Leisure and Culture in their DPS, subject to **Standing Order 13A.2 and 13A.3**.
(b) The SCIO shall not seek offers for contracts which these organisations are entitled to seek on the SCIOs behalf, except in such cases as the SCIO deems is likely that Best Value (as set out in **Standing Order 2.6**) will be obtained by seeking tenders by other means, as otherwise permitted by the DPS. Any such DPS must permit the SCIO to obtain tenders independent of the DPS if it is likely to be in the interests of Best Value (as set out in **Standing Order 2.6**) to do so.

13A.2 DPS - Conditions

Standing Order 13.1 only applies to a DPS which have been formed on the basis of competitive tenders and in full compliance with any legal requirements such as the duty to promote the Equal Opportunities, General Principles, the requirements of the Reform Act, Reform Act Regulations and/or European Procurement Regulations (if

applicable) and provided that the Framework Agreement contains or allows any Call Off contract awarded under this **Standing Order 13** to contain the following matters:

(vii) **Standing Order 2.3 (Form of Contract and Scots Law);**
(viii) **Standing Order 2.6 (Best Value);**
(ix) **Standing Order 16A (Compliance with the Data Protection Laws);**
(x) **Standing Order 17 (Confidentiality and Requests for Information);**
(xi) **Standing Order 18 (E-Procurement);** and
(xii) where appropriate, all **Standing Orders** relating to contract conditions

13A.3 DPS - Procedure for Calling Off

Any Call Off Contract to be made under an external DPS must comply with:

(a) the procedures specified in the DPS for the making of such a Call Off Contract
(b) be awarded using the criteria used to establish the DPS or as laid down in the DPS and
(c) where the estimated aggregated value of a Call Off Contract exceeds £50,000 the following requirements must be complied with:-
(i) **Standing Order 4.2 (Contract Reference Number**);
(ii) **Standing Order 4.3 (Sourcing Methodology**);
(iii) **Standing Order 4.14 (Community Benefits Requirement**);
(iv) **Standing Order 18 (E-procurement**);
(v) **Standing Order 20 (Checking of Tenders and Reporting**);
(vi) **Standing Order 21 (Acceptance of Tenders**);
(vii) **Standing Order 21.12 (Acceptance of Tenders – Contract Award Notices) (For Regulated Procurements**); and
(viii) **Standing Order 25 (Contract Performance Security)** (as appropriate).

14. COLLABORATIONS

14.1 Application

This Standing Order applies where the SCIO are entering into Category C1 Collaborative arrangements. The prior approval of the Board Secretary and/or Head of Corporate Services will be required to enter into any collaborative arrangement.

14.2 Non-partnership Clause

It shall be an essential express condition in every such collaborative arrangement that it is not intended that there is a legal partnership being created.

14.3a Tendering

Where in terms of the collaborative arrangements consultants/specialists or other third parties are to be appointed by either the SCIO or by the other lead partner then such appointment is to be awarded subject to competitive tendering procedures the same as those procedures specified in **Standing Orders 6 (Restricted Tendering), or 7 (Open Tendering)** or the negotiated procedure if permitted in terms of **Standing Orders 9 (Negotiated Tendering Procedure – General.**

14.3b Trading Operations

Despite the terms of **Standing Order 14.3(a),** where the collaborative arrangement allows for the other lead organisation to offer to provide the service in-house, then that service may be viewed as to be treated as if they are a Trading Operation in

which case it must comply with the Local Authorities (Goods and Services) Act 1970 and/or Local Government in Scotland 2013 (as applicable) or any statutory modification or re-enactment thereof and any Regulations made and/or Guidance issued by the Scottish Ministers.

14.3c **European Procurement Regulations**

However **Standing Order 14.3 (b)** will not apply if the estimated aggregated value of the works/goods or services would exceed the Higher Value Thresholds. In that case any contract to be awarded shall need to be awarded in terms of **Standing Order 15 (European Procurement Regulations)** regardless of whether it is the SCIO or another lead organisation seeking to award the contract in terms of the collaborative arrangements.

14.4 **Joint responsibility**

Contracting authorities will be jointly responsible for ensuring compliance with the European Procurement Regulations
where:

(i) the procurement exercise is carried out in its entirety in the name of and on behalf of all the Contracting Authorities involved, or
(ii) one of the contracting authorities manages the procurement exercise as lead and on behalf of all the Contracting Authorities involved.

15. EUROPEAN PROCUREMENT REGULATIONS

15.1.1 **Application – post brexit**

The European Procurement Regulations amended following the UK's exit from the European Union on 30 December 2020 apply to all procurement exercises commenced after 30 December 2020 where the contract value exceeds the relevant Higher Value Thresholds.

15.1.2 Application – transitional procurements and EU funded Programmes

Higher Value Procurements which commenced before 30 December 2020 or following a procurement process commenced before 30 December 2020 pursuant to the European Procurement Rules and Higher Value Procurements receiving European funding will be subject to the European Procurement Regulations and the following addition requirements:-

(a) Publication of all relevant notices on OJEU; and
(b) Continued use of the European Single Procurement Document not SPD.

15.2 **Tendering Processes**

The procedures set out in the European Procurement Regulations are to be followed in relation to the setting up of a Framework Agreement of a DPS, the award of a Call Off Contract and/or extension of a contract and the following Standing orders shall be complied with:

(i) Standing Order 2 (General)
(ii) Standing Order 4 (Pre-tender requirements)
(iii) Standing Order 5.3 (Publication of Notices)
(iv) Approvals in terms of **Standing Order 9 - (Negotiated Tendering Procedures – General), 11 (Competitive Dialogue), 11A (Innovation Partnerships, 11B(Competitive Procedure with Negotiation) or 14 (Collaborations)**

(v) Standing Order 16 (Assurances – Tendering)
(vi) Standing Order 16A (Compliance with the Data Protection Laws) (if appropriate);
(vii) Standing Order 17 (Confidentiality and Requests for information);
(viii) Standing Order 18 (E-procurement);
(ix) Standing Order 19 (Selection of Tenderers);
(x) Standing Order 20 (Checking of Pre-qualification Questionnaires/Tenders and Reporting);
(xi) Standing Order 21 (Acceptance of Tenders);
(xii) Approvals in terms of **Standing Order 22 (Extensions on Contracts)** ;
(xiii) **Standing Order 24 (Responsible Third Party);**
(xiv) **Standing Order 25 (Contract Performance Security)** (if applicable);
(xv) **Standing Order 35 (Contract Modifications);**
(xvi) **Standing Order 36 (Retention of Contract Documents);**
(xvii) All **Standing Orders** relating to contract conditions.

15.3 **Light Touch Regime**

Not applicable.

16. ASSURANCES – TENDERING

16.1 **As part of Assessment Process**

As part of any tendering process, the SCIO shall obtain from tenderers, or have confirmed via another tender process satisfactory assurances in writing in the form determined by the Board Secretary and/or Head of Corporate Services that:

(a) the tenderer has complied with all statutory requirements in respect of observing the Equalities Legislation;

(b) where the contract is for the provision of services of a public nature the tenderer has complied with the terms of the Human Rights Act 1998 in relation to the previous provisions of such services;

(c) the tenderer has not practised collusion in tendering for any contract with the SCIO or offered, promised or given any financial or other advantage to the SCIO or any person employed by or on behalf of the SCIO in connection with the obtaining or carrying out of any contract with the SCIO;

(d) the tenderer has not engaged in serious and organised criminal activities;

(e) where the contract is for the carrying out of works and/or the provision of construction services and/or supplies the tenderer has not engaged in blacklisting activities in the employment of their staff, and

(f) the tender commits to prompt payment of subcontractors.

(g) the tenderer has complied with the requirements of the Modern Slavery Act 2015; and

(h) the tenderer has complied with such other requirements as are relevant to the contract being procured.

16.2 **Supporting Evidence and Signing**

(a) Such assurances as may be required for a particular contract in terms of **Standing Order 16.1** must be supported by satisfactory evidence (if required).

(b) Where the contractor is a corporate body then assurances must be provided by a Director of the corporate body or other person authorised to bind the corporate body personally.

(c) Reference should be made to the Practice Notes or Procurement Processes and guidance sought from the SCIO's lawyers on the appropriate requirements (if required) in relation to Equal Opportunities.

16.3 **Selection Criteria – Obtaining Assurances**

All documents detailing the selection criteria will specify that selection will include the obtaining by the SCIO of satisfactory assurances in terms of **Standing Order 16.1.**

16A **Compliance with Data Protection Laws**

16A.1 **To be in compliance with The Data Protection Laws**

The Board Secretary must comply with the Data Protection Laws including where appropriate:-
(a) The carrying out of a Data Protection Impact Assessment; and/or
(b) Ensuring where the contractor will be a Data Processor (as defined in the Data Protection Laws that a written contract is entered into.

17. CONFIDENTIALITY AND REQUESTS FOR INFORMATION

17.1 **Giving out of Information not to be unreasonably excluded**

All tender documentation, agreements or contracts shall not prohibit disclosure of information which could otherwise be disclosed in compliance with the Freedom of Information (Scotland) Act 2002 or the Environmental Information (Scotland) Regulations 2004 or any other legislation amending or replacing it or any guidance and/or codes of practice issued by the Scottish Information Commissioner in relation to such legislation.

17.1.2 No tender documentation, agreement or contract should contain a condition that restricted unjustifiably the disclosure of information held by the SCIO in relation to tender documentation, agreement or contract.

17.2 **Procurement/Contracting Toolkits**

Reference should be made to the Practice Notes and specifically South Lanarkshire Leisure and Culture's Confidentiality and Procurement/Contracting Toolkit No1 and the Requests for Information and Procurement/Contracting Toolkit No2 for guidance and appropriate requirements.

18. E-PROCUREMENT

18.1 **Use of E-Procurement**

All procurement exercises where the estimated valued of the contract exceeds £5,000 must be conducted using E-procurement, using a system approved by the SCIO or by another secure electronic system as approved by the Board Secretary and/or Head of Corporate Services (Call Off contracts only).

18.2 **Verification and Authentication**

(a) Where E-procurement is being used the following requirements regarding the verification and authentication of the submission and the signature of the person making the submission must be complied with:

(i) The signature of the person making the submission must be an authorised signatory of the applicant/tenderer

(b) Any document issued using electronic means must state the SCIO's requirements relating to authentication or verification of the submission or of the signature of the person making the submission.

18.3 **Receipt and Custody**

(a) No procurement documents submitted using E-procurement will be considered unless:

(i) It is received in the format specified in the documents;
(ii) at the electronic address specified by the SCIO; and
(iii) the electronic submission has been received by the time and date specified as the pre-qualification questionnaire/tender deadline (in all cases being 12 noon).

18.4 **Late Submissions**

The electronic mailbox identifies pre-qualification questionnaires/tenders received after the date and time deadline specified for return as being late. Pre-qualification questionnaires/tenders received after the date and time deadline specified for return cannot be considered under any circumstances.

18.5 **Opening of pre-qualification Questionnaires/tenders**

(a) All procurement documents including quotes, pre-qualification questionnaires and tenders submitted using E-procurement shall be opened and be made available for download at the same time via the SCIO's approved e-procurement system.

(b) Sequential opening must be adopted for all procurement exercises, irrespective of value, where the contract will be awarded on the basis of most economically advantageous tender.

18.6 **Electronic Auctions**

Not applicable.

18.7 **Dynamic Purchasing Systems**

Not applicable.

18.8 **Electronic Catalogues**

(a) The Chief Executive may require tenders to be presented as an electronic catalogue or to include an electronic catalogue.

(b) The requirement to provide electronic catalogues shall be subject to the European Procurement Regulations and such additional procedural requirements as the Board Secretary and/or Head of Corporate Services considers necessary.

19. SELECTION OF TENDERERS

19.1 **Application**

This Standing Order shall apply to contracts apart from Call Off contracts where the estimated value exceeds £50,000. The Chief Executive must have regard to any guidance issued by the Scottish Government under the Reform Act in relation to the selection of tenderers.

19.2 **Mandatory Exclusion**

(a) The Chief Executive must apply the mandatory exclusions as are applicable to a Regulated Procurement or Higher Value Regulated Procurement as are set out in the European Procurement Regulations, Reform Act, Reform Act Regulations 2016 and any guidance issued by the Scottish Government under the Reform Act to exclude a bidder from a procurement exercise.

(b) The Chief Executive may in exceptional circumstances for overriding reasons relating to the public interest disregard any of the mandatory exclusion grounds when making a decision on the selection of a bidder.

19.3 **Discretionary Exclusion**

The Chief Executive may apply any of the discretionary exclusions as are applicable to a Regulated Procurement or Higher Value Regulated Procurement as are set out in the European Procurement Regulations, Reform Act, the Reform Act Regulations 2016 and any guidance issued by the Scottish Government under the Reform Act to exclude a bidder from a procurement exercise

19.4 **Limits on Exclusion**

A bidder must not be indefinitely excluded from participating in a procurement exercise. The Chief Executive must apply the maximum periods for excluding as set out in the European Procurement Regulations, Reform Act, the Reform Regulations and guidance issued by the Scottish Government under the Reform Act

19.5 **Self Cleansing**

(a) Where a bidder is in a situation which may result in its exclusion from a procurement process, the Chief Executive must give the bidder the opportunity to provide evidence that it has taken sufficient and appropriate remedial action to demonstrate its reliability i.e. self cleansed.

(b) When considering any self-cleansing measures provided by a bidder the Chief Executive must consider all relevant factors including the gravity and particular

circumstances of the criminal offence or misconduct.

(c) If the Chief Executive is not satisfied that the self cleansing measures are sufficient for a bidder to demonstrate its reliability, it must provide a written statement of reasons as soon as it is reasonably practicable. The statement of reasons must allow the bidder to understand why the self-cleansing measures taken were insufficient and the basis for the decision.

5 All decisions taken by the Chief Executive will be recorded in the Report on Tenders.

19.6 **ESPD**

(a) The SCIO must accept an SPD as preliminary evidence in the form of a self declaration that:-

- none of the mandatory or discretionary exclusion ground apply to a tenderer;
- if any of the mandatory or discretionary grounds apply the self-cleansing measures that have been taken; and
- the tenderer meets the relevant selection criteria

(b) The Chief Executive must set out the specific requirements and minimum standards in the contract notice and tenderers will respond using the SPD.

(c) The documents in support of the information provided in the SPD can be requested by the Chief Executive at any time during a procurement exercise but in any event:-

- in an open tendering procedure must be requested and checked prior to award.

  In a restricted tendering procedure, competitive procedure with negotiation, competitive dialogue or innovation partnership must be requested and checked prior to issuing invitations to submit tenders.

- In any procurement exercise where the Chief Executive has a genuine concern that there is a risk to effective conduct of the procurement procedure or to ensure the integrity and proper conduct of the procurement process.

(d) Where the capability or capacity of a sub-contractor or members of a consortia will be relied on to meet the selection criteria in respect of economic and financial standing or technical and professional ability in any procurement process the Chief Executive may request a separate SPD from those parties.

20. CHECKING OF PRE QUALIFICATION RESPONSES/ TENDERS AND REPORTING

20.1 **Checking prequalification responses/Tenders**

All pre-qualification documents/tenders received shall, after opening in accordance with **Standing Order 18.5**, be issued to the appropriate client Service for checking.

20.2 **Evaluation**

(a) The procurement documents shall state the selection and contract award criteria applicable to the procurement exercise. All pre qualification responses and tenders shall be evaluated strictly in accordance with the evaluation criteria set out in the procurement documents.

(b) If during the evaluation process any communication is necessary prior to selecting bidders to be invited to tender/participate or contract award in order to clarify or supplement any aspect of their Pre Qualification response/tender such communication shall be conducted in accordance with **Standing Order 20.3.**

20.3 **Clarification of Tenders**

(a) Between the last date and time for the receipt of pre qualification responses/tenders and the date on which a decision is taken as to which, if any, tenderer will be invited to submit a bid/tender is to be accepted, the contact may be made using the e-procurement system adopted for the procurement exercise with a person who has submitted a pre-qualfication response/tender in respect of any contract in cases where it may be necessary to validate or clarify the terms of the pre-qualification response/tender or to make any necessary arithmetical adjustments, but not for any other reason.

(b) All discussions should be conducted in accordance with the following additional rules:

(i) all tenderers must be treated equally and in a fair and transparent manner;

(ii) tenderers must not be allowed to change their tenders in a way that allows them to improve their offer;

(ii) all matters of clarification (other than arithmetic adjustments which should be dealt with in accordance with **Standing Order 20.3 (c)** or clarification of a matter specific to an individual tender must be notified to all persons making a pre-qualification response/tender;

(iii) where there is a need for clarification with more than one person those discussions should not be confined to the tenderer most likely to win the contract;

(iv) There must be no discussions on fundamental aspects of tenders changes to which are likely to distort competition including but not SCIO to prices;

(v) no material change to the specification and/or the criteria on which the tenders are to be assessed; and

(vi) clarification process is carried out using the e-procurement system adopted for the relevant procurement exercise with a full written record shall be kept by the Chief Executive of all contacts, discussions, communications and meetings with the tenderer and the outcome of these discussions including any adjustments made as a consequence.

(c) Where having checked all the price bids opened, that examination reveals obvious errors or discrepancies which would affect the tender rates/prices, in many of those price bids opened these errors will be dealt with in the following

manner:

(i) any obvious arithmetic errors will be rectified by the Board Secretary and/or Head of Corporate Services and the amount of the tender shall be held to be the amount of the documents so rectified and the tenderer informed in writing of the corrected amount, and

(ii) where there is an obvious and genuine error in the rates quoted, the tenderer will be given the opportunity of either confirming that they agree to their tender being considered with the error remaining or withdrawing the tender. This procedure must be undertaken in writing. If the tenderer decides to withdraw their tender, it will not be considered for acceptance. The tenderer must not be given the opportunity to submit an amended tender.

(d) Under no circumstances should a Procuring Officer re-open a ESPD/ITT on PCS-T following the return date to allow for clarification by a bidder. All clarifications should be dealt with via the messaging area on PCS-T.

20.4 **No fundamental Changes to Tender Conditions Permitted**

Standing Order 20.3 does **not** permit the making of fundamental changes to the tender specifications and/or the award criteria as a result of any post tender discussions with a person(s) making a tender. Where changes to the specification and/or the award criteria are required and/or would be advantageous to the SCIO, the tendering process must be cancelled by the Chief Executive If the tendering process is cancelled, it shall be re-started from the beginning in relation to the seeking of tenders.

20.5 **Report on Pre-Qualification responses/Tenders**

Following the checking and assessment of all pre qualifications/tenders received in relation to a particular contract (including a Call Off Contract), a Report on Tenders in a format approved by the Board Secretary shall be prepared and approved by the Chief Executive.

20.6 **Exclusion of Tenderers before submission of Tenders**

(a) As soon as reasonably practicable after deciding to exclude a tenderer from participating in a procurement exercise in terms of **Standing Order 19** at any stage before submitting a tender, the Chief Executive must notify the tenderer of that decision in accordance with the requirements of the Reform Act Regulation 2016, and any guidance and requirements as the Board Secretary considers appropriate.

(b) The letter must be in a format approved by the Board Secretary and should be issued in accordance with **Standing Order 21.5.**

21. ACCEPTANCE OF TENDERS

21.1 **£200,000 and Below –**Chief Executive **or Board Secretary**

Where the estimated aggregated value of any contract for the supply of any goods, the carrying out of any works or the provision of services does **not exceed** £200,000:

(i) the lowest priced tender (in a price only tender for a works contract where the

estimated value is less than £2million), or
(ii) the most economically advantageous tender

may be accepted by the Chief Executive or Board Secretary and a letter of acceptance issued to the successful contractor. A copy of the contract acceptance must be retained by the Board Secretary.

21.2 **Over £200,000 – Chair and** Chief Executive **or Board Secretary**

(a) Where the estimated aggregated value of any contract for the supply of any goods, carrying out of any works or the provision of any services **exceeds £200,000**:

(i) the lowest tender (in a price only tender for a works contract where the estimated value is less than £2million), or
(ii) the most economically advantageous tender

may be accepted by the Chief Executive or Board Secretary, following consultation and agreement with the Chair or (in his/her absence) the Acting Chair of the Board and a letter of acceptance issued to the successful tenderer.

(b) Where no such agreement can be reached then the tender can only be accepted on the authority of the Board following consideration of a written report specifying reasons for the failure to agree and the details of the relevant tenders.

(c) A copy of the contract acceptance should be sent to the Board Secretary.

21.3 **Not accepting the Lowest Tender (in a Price only Tender for works where the estimated value is less than £2million) or where the Cost of the Tender exceeds the Financial provision**

Where it is proposed to accept a tender:

(i) which is either:

(a) not the lowest submitted (in a price only tender for a works contract where the estimated value is less that £2million),or

(b) the cost of the tender is in excess of the financial provisions which have been made and approved by the Company in terms of the Company's Financial Regulations.

(ii) where funding is provided by a third party which has been approved by the Company.

then such tender shall only be accepted by the Chief Executive and a letter of acceptance issued to the successful tenderer on the authority of the Board following consideration by the Board of a written report advising of that fact, the likely additional costs and where applicable the reason(s) for not accepting the lowest tender submitted.

21.3A **Abnormally Low Tenders**

(a) Where a tender appears in the opinion of the Chief Executive, to be

abnormally low having considered all factors which may affect price or costs and the effective delivery of the contract he must require a tenderer to explain.

(b) A tender must be rejected as being abnormally low if:

(i) the Chief Executive is not satisfied that the evidence supplied explains the low level of the tender, or
(ii) it has been established that the tender is abnormally low because it does not comply with environmental, social or labour law.

(c) A tender must not be rejected solely on the basis of low price or cost.

(d) In deciding whether to exclude an abnormally low tender the Chief Executive must comply with any guidance issued by the Scottish Government under the Reform Act and any guidance and requirements as the Board Secretary considers appropriate.

21.4 **No tender Being Accepted**

If the Chief Executive decides that none of the tenders submitted should be accepted, then the Chief Executive shall notify all persons making tenders accordingly.

21.5 **Issue of Letters**

(a) Letters to the unsuccessful tenderer will be issued at the same time as the letter to the successful tenderer.

(b) Letters to be issued under this Standing Order shall be in a format approved by the Board Secretary and/or Head of Corporate Services.

(c) Letters to be issued under this Standing Order shall be issued electronically via the SCIO's approved e-procurement system and may be followed up by the posting of a hard copy at the discretion of the Board Secretary and/or Head of Corporate Services.

21.6 **General Conditions**

No tender shall be accepted:-

(ai) unless the Chief Executive and the Board Secretary and/or Head of Corporate Services are satisfied as to the current technical capability and professional ability of the tenderer

(aii) the Chief Executive and the Board Secretary and/or Head of Corporate Services are satisfied with the economic and financial standing of the tenderer in question (other than for contracts being procured using the urgency ground of the negotiated tendering procedure in accordance with **Standing Order 9.3.2**);

(b)Where the tender is not within the financial provisions which have been made and approved by the Board in terms of the SCIO's Financial Regulations or funding is provided by a third party which has been approved by the Board, the additional cost has received prior approval from the Board;

(c) the tenderer and any sub-contractor/consultant who will be used to deliver the contract agrees to comply with the terms of:

(i) **Standing Orders 17 (Confidentiality and Requests for Information),**
(ii) All **Standing Orders relevant to contract terms**; and
(iii) **Standing Order 25 (Contract Performance Security)**

(d) the tenderer has provided the appropriate assurances as required in terms of **Standing Order 16.1 (Assurances – Tendering)**;

(e) where the contractor will be a Data Processor (as defined in the Data Protection Act 1998 and any legislation amending same) the requirements of **Standing Order 16A (Compliance with Data Protection Laws)** have been complied with, or

(f) where a contract is of a type referred to in the Local Government Contracts Act 1997 (a contract of services lasting or intended to last for a period of 5 years or longer or a financial arrangement relating to such a contract) the contract shall not be entered into by the SCIO until a certificate in compliance with the Act is issued by the SCIO where it is requested by the tenderer; and

(g) the Chief Executive is satisfied with the documentary evidence or certificates produced by the tenderer in support of the information provided in the ~~E~~SPD

a.7 **Compliance with the Standstill Period**

(a) Where the European Procurement Regulations apply to any contract no acceptance of a successful tender shall be made by the SCIO unless and until the standstill procedure set out in ~~Regulation 32 of~~ the European Regulation has been followed.

(b) The Standstill period referred to in the standstill procedure depends on the method by which the standstill letter is sent. If the standstill letter is sent by fax or email the standstill period is a minimum of 10 calendar days from the date on which the last standstill letter for the particular tender is sent and if sent by any other means the standstill period is a minimum of 15 calendar days. In calculating the standstill period the date the standstill letter is sent must be disregarded and if the last day is not a working day the standstill period must be extended to the next working day.

(c) The standstill letters must be in a format approved by the Board Secretary and/or Head of Corporate Services and signed by the Chief Executive.

(d) At the option of the appropriate Executive Director a voluntary standstill period can be observed in relation to the award of any contract and/or setting up of a Framework Agreement, DPS or arrangement established in terms of the light touch regime and/or the award of a Call Off Contract and the provisions of this Standing Order 21.7 will apply

21.8 **Notification of Award To Board**

(a) Any contract awarded with an estimated aggregated value in excess of £50,000

shall be reported by the Chief Executive to the Board at the next scheduled meeting.

(b) The report shall contain the following information:

(i) the name of the successful tenderer(s);
(ii) the value of the contract awarded;
(iii) the date of the award, and
(iv) a brief description of the contract and such information as may be specified from time to time by the Board Secretary and/or Head of Corporate Services.

21.9 **Debrief**

The SCIO will offer all unsuccessful tenderers an opportunity for a debrief.

21.10 **Giving Reasons – Regulated Procurements**

(a) In relation to all Regulated Procurements the Chief Executive must notify the SCIO's decision to award to all unsuccessful bidders.

(b) The notification must be in a format approved by the Board Secretary and/or Head of Corporate Services and signed by the Chief Executive.

21.11 **Provision of Further Information – Regulated Procurements**

Where a written request for further information is received from a person in relation to a Regulated Procurement the SCIO must comply with the requirements of the Reform Act and seek legal advice and assistance as required.

21.12 **Contract Award Notices**

(a) The Chief Executive shall ensure that Contract Award Notices are published for all Regulated Procurements (including Call Off Contracts) and Higher Value Regulated Procurements (other than Call Off Contracts) as soon as possible after acceptance of the successful tender/appointment to a Framework or DPS and no later than 30 days after the issue of the letter of award of the contract / conclusion of the Framework or DPS in accordance with **Standing Order 5.3.**

(b) Where a contract has been awarded based upon a DPS the contract award notices can be aggregated on a quarterly basis and published within 30 days after the end of each quarter.

22. EXTENSION TO CONTRACTS

22.1 **Extension to Contracts Subject to European Procurement Regulations**

(a) The extension of a contract which was originally procured under the European Procurement Regulations and includes an option to extend, may be extended under **Standing Order 22.2** even if the estimated aggregate value of the extension is above the relevant Higher Value.

(b) Where a contract was not originally procured under the European Procurement Regulations and the estimated aggregated value of the proposed extension is above the - relevant Higher Value Thresholds, then the proposed extension

(whether or not the extension was provided for in the original contract) cannot be made under this Standing Order and **Standing Order 15 (European Procurement Regulations)** will apply.

22.2 **Authorisation of a Contractual Extension**

(a) Where the Chief Executive considers that an existing contract should be extended and the option to extend was disclosed in the original contract notice and procurement documents for the contract the Chief Executive may authorise the exercise of that option provided the Chief Executive is satisfied:

(i) the extension secures Best Value (as set out in **Standing Order 2.6**);

(ii) the period of the extension does not exceed the original period of the contract;

(iii) The original contract has not been extended previously in terms of this **Standing Order 22.2** (unless the contractual extension can be exercised in instalments in terms of **Standing Order 22.2(b)**;

(iv) With the financial standing of the contractor, and

(v) that the performance of the contractor in the original contract period has been satisfactory in that an average performance rating of 70% or above has been achieved in the performance appraisals(s) carried out during the original contract period.

(b) A contractual extension can be exercised in instalments provided that the period of those instalments are stated in the contract notice, procurement documents and any subsequent separate contract document.

22.3 **Non Contractual Extension**

(a) where the contract does not make provision for the extension of the contract or the contract has already been extended in terms of **Standing Order 22.2,** the Chief Executive shall not extend the contract unless:
(i) The use of the negotiated procedure can be justified in terms of **Standing Order 9 (Negotiated Tendering Procedure – General)**, and
(ii) The conditions set out in **Standing Order 22.3 (b)** are satisfied.

(b) **Conditions to be Applied to a Non Contractual Extension**

A contract for the supply of goods, the carrying out of works or the provision of services may be extended without fresh competition for further goods, works or of a similar description provided that:

(i) the original contract was won in competition;

(ii) the unit costs in respect of the supply of further goods, or the costs in carrying out the particular works or providing those particular services have not increased by more than 10% (after making allowance for the rate of inflation by use of the Customer Price Index) over those contained in the original contract; and

(iii) the extension proposed is reasonable in all circumstances;

(iv) the period of the extension does not exceed the original period of the original contract;

(v) the original contract has not been extended previously in terms of this **Standing Order 22.3;**

(vi) the Chief Executive is satisfied with the financial standing of the contractor, and

(vii) the performance of the contractor in the original contract period has been satisfactory in that an average performance rating of 70% or above has been achieved in the performance appraisal(s) carried out during the original contract period.

22.4 **Authorisation of a Non-Contractual Extension**

No contract shall be extended in accordance with **Standing Order 22.3** except with the prior written authorisation of the Chief Executive either in consultation with the Board Secretary and/or Head of Corporate Services or with his/her agreement (if agreement is required in compliance with Section 19.2 of the company's Financial Regulations) and the Chair (or in their absence) the Acting Chair of the Board.

22.5 **Notification to Board**

Any contract extended under **Standing Order 22** shall be reported to the Board by the Chief Executive at the next scheduled meeting in a format approved by the Board Secretary and/or Head of Corporate Services.

22.6 **Keeping Records**

In all cases where a contract is extended in accordance with this **Standing Order 22,** a full written record of all contracts, discussions and communication with the contractor shall be kept by the Chief Executive together with a full explanation as to why the Chief Executive considered it appropriate to extend the contract and confirming that the extension secures Best Value (as set out in **Standing Order 2.6)**.

22.7 **Social Care Services**

N/A

23. NOMINATION OF SUB-CONTRACTORS

23.1 **Tendering for Sub-Contractors**

Where a contract provides for the nomination by the Chief Executive of a sub-contractor or supplier for the supply of goods, carrying out of works or provision of services as the case may be, the following provisions shall apply:

(a) tenders shall be invited by the Chief Executive from not less than five entities whom he considers competent (having regard to the technical capability and financial standing of such entities) for the purpose unless, in consultation with the Chair (or in their absence) Acting Chair, they considers that less than five persons are competent in which case they may invite tenders from such lesser number of persons, and

(b) all tenders shall be submitted, opened, checked and accepted in accordance with **Standing Orders 18 (E-procurement), 20(Checking of Pre Qualification Documents/Tenders and Reporting) and 21 (Acceptance of Tenders).**

24. RESPONSIBLE THIRD PARTIES

24.1 Obligations of third Parties

Any third party or person (not being an Officer of the SCIO) who is responsible to the SCIO for a contract on its behalf shall in relation to that contract:

(a) comply with these Standing Orders as though he were an official of the SCIO;

(b) at any time during the carrying out of the contract produce on request to the Chief Executive all records maintained by him in relation to that contract, and

(c) on completion of the contract, transmit to the Chief Executive all such records relating to that contract including information relevant to Transfer of Undertaking Regulations or amending legislation, where appropriate or applicable.

24.2 To be a contract Condition

A condition to this effect shall be included in any contract/documentation appointing the third party.

25. CONTRACT PERFORMANCE SECURITY

25.1 N/A

26. CONTRACT TERM – SUB- CONTRACTORS

26.1 Obligations on Sub-Contractors

It shall be a condition of every contract entered into by the SCIO that all conditions to be observed by contractors in terms of these Standing Orders and in the contract itself shall equally apply to sub-contractors, and all contractors shall be responsible for the observance of such conditions by such sub-contractors.

27. CONTRACT TERMS – INSURANCE

27.1 Contractor must have Insurance to specified level

All specifications issued by and contracts entered into with the SCIO in connection with the carrying out of works or the provision of services or supplies shall provide that the contractor shall be insured with an Insurance Company approved by the SCIO or shall demonstrate self insurance to the satisfaction of the Chief Executive against:

(i) liability at common law and/or under any legislation including but not restricted to liability under Employer's Liability Compulsory Insurance;

(ii) liability to third parties;

(iii) Any relevant professional indemnity cover, and

(iv) Any other matters relevant to the contract being entered into to such levels as may be specified from time to time by the Board Secretary and/or Head of Corporate Services or by law.

27.2 **Proof or Insurance – Contract Term**

It shall be a condition of every contract entered into with the SCIO for the carrying out of works or the provision of services or supplies to, the SCIO, that:

(a) Current Certificates of insurance shall be exhibited to the SCIO prior to the commencement of every contract;

(b) any new policy of insurance (under which circumstances **Standing Order 27.1** shall apply to the new insurance policy) shall be exhibited to the SCIO prior to or at its commencement, and

(d) on demand any renewal receipts shall be exhibited during the period of the contract.

27.3 **Dealing with Claims – Contract Terms**

It shall be a condition of every contract entered into with the SCIO for the carrying out of works for, or the provision of services or supplies to the SCIO, that the contractor shall require to deal with any claim, potential claim or complaint arising from the carrying out of said works or the provision of said services or supplies, made by the SCIO or any other person deriving right or benefit there from,

(a) by providing in writing within fourteen calendar days of such claim, potential claim or complaint first having been intimated to the contractor, details of the name and address of their Insurance Company, together with the relevant policy number, to enable such claim, potential claim or complaint to be intimated to their Insurance SCIO by the SCIO or any such other person;

(b) declaring that the contractor shall be obliged thereafter to provide timeously to their Insurance Company all relevant details to enable such claim, potential claim or complaint to be processed with the minimum delay; and

(c) binding the contractor to update the SCIO on the progress and outcome of any claim submitted by the SCIO or any other person deriving right or benefit from the SCIO.

28. CONTRACT TERMS – ILLEGAL PRACTICES

28.1 **Cancellation of contract**

Every contract entered into by the SCIO shall contain a clause entitling the SCIO to cancel the contract and to receive from the contractor the amount of any loss resulting from such cancellation if the contractor or any of their representatives (whether with or without the knowledge of the contractor) shall have practised collusion in tendering for the contract or any other contract with the SCIO or shall have offered, promised or given to the SCIO or any other public body or any person employed by or on behalf of the SCIO or any other public body any financial or other

advantage to induce a person to perform improperly or to reward a person for the improper performance of a relevant function of activity in relation to the obtaining or carrying out the contract or any other contract with the SCIO or any other public body.

28.2 **Remedies**

Where a contract is cancelled in terms of **Standing Order 28.1**:

(a) the contractor shall be liable for any loss or damage which the SCIO may thereby sustain;

(b) where the contractor is included in any list of persons who will be considered for tenders the Chief Executive shall immediately remove or require the removal of the contractor from the list; and/or

(c) where the Contractor is appointed to any Framework or DPS, the Chief Executive shall immediately remove or require the removal of the contractor from the Framework or DPS.

29. CONTRACT TERMS – ASSIGNATION

29.1 **No Assignation permitted**
Unless specifically permitted in a contract, a contractor shall not assign or sub-let the contract or any part thereof except with the prior written consent of the SCIO.

29.2 **Approval**
The Chief Executive shall approve any request to sub-contract or assign the contract or any part thereof which meets:-

(a)the requirements of the contract conditions in relation to sub-contractors and assignation.
(b)the following requirements of Standing Order:-
(i) **Standing Order 16** (Assurances – Tendering) (as appropriate);
(ii) **Standing Order 19.1** to **19.5 9**(Selection of Tenderers); and
(iii)**Standing Order 21.6 (a) and (d) to (g)** (general Conditions – Acceptance of Tenders)

30. CONTRACT TERMS – EQUALITIES LEGISLATION

30.1 **To be in compliance with Equalities Legislation**

Where the contract relates to the discharge of a SCIO function, the contractor shall be bound to discharge that function in a manner which encourages the observance of the Equalities Legislation.

30.2 **Undertaking in relation to Equalities**

Where a contractor is undertaking a function of the SCIO on its behalf the contract must contain an undertaking by the contractor, when carrying out that function, not to do any act which constitutes discrimination on the grounds of sex, marital status, race, disability, age, gender, sexual orientation, language or social origin or other personal attributes (including religion or lack thereof) such as religious beliefs or political opinions (or lack of such beliefs or opinions). Further the contract must contain such provision(s) as is/are necessary, having due regard to the need to:

(a) eliminate unlawful discrimination;
(b) eliminate harassment;
(c) promote equality of opportunity;
(d) take steps to take account of persons disabilities etc, even where that involves treating disabled persons etc more favourably than other persons;
(e) promote positive attitudes; and
(f) encourage participation in public life.

To ensure that the Company can comply with its statutory duties, and where appropriate to ensure that the contractor will comply with its statutory duties under Equalities Legislation.

31. CONTRACT TERMS – HUMAN RIGHTS ACT 1998

31.1 **To be in compliance With the Human Rights Act 1998**
Where appropriate any contract must contain an assurance in writing, in the form determined by the Board Secretary, that the contractor will comply with the requirements of the Human Rights Act 1998 in so far as they are carrying out functions for the SCIO and that the contractor will indemnify the SCIO against any and all claims that may be made against the Company due to a breach of the Act which is caused by, or arises out of, the contract or any actions or omissions of the contractor under the contract.

32. TRADING OPERATIONS

32.1 No Longer Applicable.

33. CONTRACT TERMS – COMPLIANCE WITH ENVIRONMENTAL, SOCIAL AND EMPLOYMENT LAW

33.1 The Chief Executive must include in a contract or Framework Agreement or DPS conditions relating to the performance of the contract, Framework Agreement, DPS that:

(h) are linked to the subject matter of the contract, Framework Agreement, DEPS;

(ii) are indicated in the call for competition or procurement documents; and

(iii) are reasonably necessary to ensure that the successful bidder complies with environmental, social and employment law.

34. CONTRACT TERMS – TERMINATION OF CONTRACTS

34.1 **Express Term of Contract**

It shall be a condition of every contract entered into by the SCIO, all Framework Agreement, any DPS established by the SLC that the Company has the right to terminate the contract, Framework Agreement or Call Off Contract where:

(i) the contract or Framework Agreement, DPS or Call Off Contract has been subject to substantial modification which would have required a new procurement exercise;

(ii) the contractor at the time of the award was subject to one of the mandatory grounds of exclusion in the European Procurement Regulation or the Reform Act Regulations and should have been excluded from the procurement

exercise

34.2 **Implied Term of Contract**

Even if there is no express term in a contract allowing the SCIO to terminate the contract or Framework Agreement on any of the grounds mentioned in **Standing Order 34.1** a term will be implied giving the Company the right to terminate on giving notice.

34.3 **Approval**
The decision to terminate any contract, Call Off Contract or a contractor's appointment to a Framework Agreement or DPS shall be authorised by the Chief Executive in consultation with the Board Secretary and/or Head of Corporate Services.

35. CONTRACT MODIFICATIONS

35.1 **Application**

(a) A contract or Framework Agreement, DPS may be modified during its term without a new procurement exercise being carried out provided the requirements of Regulation 72 of the European Procurement Regulations are met.

(b) This Standing Order will apply to all contracts or Framework Agreements, DPS or Call Off Contracts where the estimated value exceeds £50,000 and includes all Higher Value Regulated Procurements.

35.2 The decision to modify in accordance with this Standing Order shall be authorised by the Chief Executive in consultation with the Board Secretary and/or Head of Corporate Services.

36. RETENTION OF CONTRACT DOCUMENTS

36.1 **Retention of Contracts Awarded**

(a) The Chief Executive must ensure that copies of all contracts awarded are kept in accordance with the SCIOs retention policy for contract documents.

This Standing Order applies to all contracts where the estimated value exceeds £50,000 and includes Higher Value Procurements.

36.2 **Retention of documents Relevant to awarded Contracts**

(a) The Chief Executive must ensure that the progress of all procurement exercises where the contract value exceeds £50,000 (including all contracts where the value exceeds the Higher Value thresholds) is documented and that those documents are kept for a period in line with the SCIOs retention policy for contract documents.

(b) The documentation retained must justify decisions taken in all stages of the procurement exercise and comply with the requirements of any relevant Procurement Process.

37. PROCUREMENT STRATEGY

37.1 Preparation of the Procurement Strategy

(a) Before the start of each new financial year, the SCIO must review its procurement strategy and it appropriate revise that Procurement Strategy in accordance with the requirements specified in the Reform Act and any guidance published by the Scottish Government under the Reform Act.

37.2 Publication of the Procurement Strategy

The Company must publish the Procurement Strategy and any revised Procurement Strategy on its website and in any other manner as indicated by the Board Secretary and/or Head of Corporate Services.

38. ANNUAL PROCUREMENT REPORT

38.1 Not applicable.

SOUTH LANARKSHIRE
Leisure & Culture

Agenda Item

Report

9c

Report to:	**Performance, Finance and Audit Committee**
Date of Meeting:	**17 August 2026**
Report by:	**Gillian Simpson, Head of Strategy and Governance**

Subject:	**Staff Governance Framework**

1. Purpose of Report

1.1. The purpose of the report is to:

- Provide an overview of the staff governance framework for South Lanarkshire Leisure and Culture (SLLC).

2. Recommendation

2.1. The Committee is asked to approve the following recommendations:

(1) That the overview of the existing staff governance framework as detailed in section 4, be noted, and remitted to the Board for approval and assurance;
(2) That the proposal to introduce an annual summary report to provide continued Board assurance be endorsed and remitted to the Board for approval.

3. Background

3.1 The Performance, Finance and Audit Committee (PFAC) has within its terms of reference, as set out in the Governance Guide, the remit for people governance. The Committee is tasked with supporting a culture of the highest standards of staff management in line with policies and procedures.

3.2 A framework for staff, or people, governance is the system of providing assurance on how staff are managed, feel they are managed, and how these contribute to continuous improvement in service delivery. Accountability for this system of assurance sits with the Board of SLLC.

3.3 Within the legal agreement between South Lanarkshire Council (SLC or the Council) and SLLC, staffing policy is aligned to that of Local Government in general and the Council in particular in employment matters, for example, terms and condition and salary levels. Whist SLLC takes cognisance of this relationship, this does not remove the responsibility and accountability of the Board of SLLC for staff governance.

3.4 Decisions taken on all operational staffing matters in SLLC is delegated to the Chief Executive and exercised by managers and the HR team within SLLC, including the appointment and deployment of staff. Partnership arrangements on employment matters are active between SLLC and their counterparts in SLC, and SLLC meet regularly with Trade Union representatives.

3.5 The Chief Executive brings reports, by exception to Board, on major issues relating to staffing, for example, advising on structure, resource and service issues on filling/holding posts, etc.

3.6 A report to this committee on 1 May 2025 noted that officers would develop a framework for staff governance to provide systematic assurance on how staff are managed, and that the framework would be brought to a future Committee meeting, prior to being presented at Board. The framework is detailed in Section 4 below.

4. Staff Governance Framework

4.1. Purpose

4.1.1 To ensure consistent, fair, and accountable management of staff through clear roles, decision-making processes, and oversight arrangements.

4.2. Principles

4.2.1 Our Dignity at Work Policy, Grievance and Disciplinary Procedures for all employees, Disciplinary Handbook for managers alongside our Code of Conduct, Appraisal and Behavioural Frameworks, sets clear expectations for how we treat one another and expected conduct for all. These policies are not optional; they are fundamental to who we are and how we operate as an organisation committed to integrity, fairness, and positive impact.

4.2.2 Our core values in action - living our values means:

- **Do the Right Thing**
  Act with integrity, challenge inappropriate behaviour, and ensure concerns are taken seriously and addressed promptly and fairly.
- **Be a Great Team**
  Foster respectful, inclusive environments where differences are valued, collaboration is encouraged, and everyone feels safe to contribute.
- **Own It**
  Take responsibility for your behaviour and leadership impact. Address issues early, role model expected standards and follow policy consistently.
- **Be Positive**
  Promote constructive communication, support wellbeing, and encourage a culture where people are treated with dignity at all times.

4.2.3 These expectations are clearly set out in our key documents:

- **The Behavioural Framework** – how our values translate into everyday behaviours
- **Code of Conduct** – the standards we all commit to as part of working at SLLC
- **Dignity at Work Policy** – guidance on what dignity at work means, what is unacceptable behaviour, and how concerns can be raised and addressed
- **Grievance Procedures**- guidance on grievance and how employees can raise concerns if they feel they have not been treated fairly.
- **Disciplinary Procedures/ managers Handbook** – guidance on all matters relating to conduct and what processes the manager must follow.
- **Appraisal** - how we set standards, identify training and develop our staff.

4.3. Structure and Responsibilities

4.3.1 A summary of roles and responsibilities in relation to staff governance is detailed in the table overleaf.

Role	Responsibilities
SLLC Board	Strategic oversight of workforce; approve key policies
Performance Finance and Audit Committee	Support a culture of the highest standards of staff management in line with SLLC policies and procedures
Policy and Strategy Committee	Consider any proposals by the SLLC Board to amend or modify existing HR policies including terms and conditions of employment.
Leadership Team (LT)	Implement workforce strategy and policies
HR/Compliance Team	Provide policy guidance, compliance oversight, and workforce data (HR)
Line Managers	Day-to-day staff management and policy implementation
Employees	Adhere to policies and codes of conduct

4.4. Policy Framework

4.4.1 The SLLC Policy Framework is a structured set of policies, procedures, and guidance that govern how the SCIO leads its workforce. It ensures consistency, legal compliance, fairness, and clarity in expectations for both employees and managers. These are split into three key areas: HR Policy, Information, Governance and Compliance Policy and Health and Safety Policy. Refer to agenda item 8 for proposals on a new framework for policy review.

4.5 Health and Safety

4.5.1 The SLLC health and safety policy, detailed health and safety procedures and robust risk management and reporting arrangements ensure effective health and safety management across the organisation.

4.5.2 An employee Health and Safety working group meets quarterly, Chaired by the Health and Safety Manager. This is regularly attended by the nominated Board Health and Safety representative.

4.5.3 The Performance, Finance and Audit Committee considers and monitors measures for safeguarding the health, safety and welfare at work and an annual Health and Safety update report is presented each year to the SLLC Board.

4.6 Risk Management

4.6.1 The SLLC Risk Register is formally reviewed on an annual basis, or any occasion that the key risks change, to ensure that it continues to represent the key business risks. *Lack of staff, staff skills and the capacity to deliver the Service* is included as a key risk within the current risk register, as approved by this Committee in May 2026. Various control measures are in place including a training and development programme, recruitment and selection procedures, appraisals process and workforce planning.

4.7 Strategic Workforce Plan

4.7.1 Work is currently underway to develop a workforce planning strategy aligned to the new SLLC Strategy (2027-2032). This will ensure that we have the *right people in the right place at the right time* with the necessary knowledge, skills and behaviours to deliver our business objectives.

4.7.2 This workforce plan sets out our longer-term thinking about future service delivery, financial pressures, and the opportunities and challenges that lie ahead. It describes our planned strategy for developing and preparing our workforce and the organisation to ensure we have a sustainable workforce of the right size, with the right skills and competence which is responsive to current and future service demand.

4.8 Employee Communications

4.8.1 Employee communication within SLLC takes various forms, including:

- Management Bulletins are used to disseminate key information to all staff or groups of staff as required, for example policy amendments or compulsory mandatory training reminders
- Staff Newsletter 'SLLC Insight' has recently been re-introduced to share information and good news stories amongst employees
- Team Meetings help to keep everyone informed about updates, priorities, and changes, reinforces team objectives and encourages open dialogue amongst colleagues
- Regular 1:1 meetings are encouraged to strengthen relationships between employees and their direct line managers

4.9 Employee Engagement and Voice

4.9.1 Opportunities for employee engagement ensure employees feel involved, heard, and able to influence their workplace. Examples within SLLC include:

- Employee Surveys: SLLC use employee surveys to provide a clear and structured way to understand how employees feel about their work, the organisation, and its leadership. The most recent survey was undertaken in 2024, and a survey of casual employees is scheduled for 2026.
- Employee Network: The network, which is facilitated by the Council, gives SLC and SLLC employees the chance to share experiences and raise issues. There are four themes: Caring Matters, Disability Matters, Ethnicity Matters and LGBT Matters.
- Partnership with Trade Unions: Partnership working will operate in all areas and at all levels in the organisation and will as far as possible aim to produce agreed strategies and solutions by consensus rather than adversarial collective bargaining. The Joint Consultative Committee (JCC) meets every 4-6 weeks and includes representatives from all our trade union partners including Unison, Unite and GMB.

4.10 Staff Appraisal and Recognition

4.10.1 Performance appraisal is a structured process for both employees and their line manager to discuss and agree key work objectives and performance relevant to service delivery. This annual process also allows learning, and development needs to be established to support employees in carrying out their duties.

4.10.2 The Employee Recognition Scheme was re-launched in April 2026 following a refresh to ensure the scheme remains meaningful, inclusive, and aligned with the organisation's core values. The scheme accepts nominations from both customers and employees and will see individual staff members recognised on a quarterly basis

via the staff newsletters and team nominations recognised on an annual basis via the newsletter and annual stakeholder event.

4.11 Performance and Reporting

4.11.1 As part of SLLC's internal performance management arrangements, regular workforce monitoring reports are shared with the Extended Management Team on a monthly basis and discussed at the six-weekly Extended Management Team and Leadership Team meetings. This includes data on:

- attendance statistics
- occupational health
- discipline, grievance, dignity at work and mediation
- accidents/incidents statistics
- labour turnover/analysis of leavers and exit questionnaires
- recruitment monitoring

4.11.2 It is proposed that a summary report be presented to the SLLC Board on annual basis to provide assurance that the staff governance framework herein is being successfully implemented and that appropriate arrangements are in place for fair and effective management of staff across SLLC.

4.11.3 SLLC are required by law to carry out Gender Pay Reporting under the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017. This information is already reported annually to the SLLC Board and with the results published on the SLLC website and a government website (https://gender-pay-gap.service.gov.uk).

5. Next Steps

5.1 This report is intended to provide assurance to the SLLC Board that appropriate arrangements are in place to ensure fair and effective management of staff across SLLC.

5.2 Subject to approval, officers will bring forward the first annual staffing report to the SLLC Board in August 2027.

5.3 A few minor amendments to the Governance Guide would also help clarify roles and responsibilities in relation to staffing and this will be incorporated as part of a wider review of the Governance Guide which is scheduled for later this year.

6. Employee Implications

6.1 There are no employee implications arising from this report as it contains an overview of existing staff governance arrangements.

6.2 The SLLC Board has corporate accountability for the fair and effective management of staff, and the introduction of an annual summary report will help to strengthen oversight and awareness of staff governance arrangements and provide Trustee's with an additional level of assurance.

7. Financial Implications

7.1. There are no financial implications arising from this report.

8. Other Implications

8.1. There are no other implications in terms of risk and sustainability.

9. Equality Impact Assessment and Consultation Arrangements

9.1. There is no requirement to carry out an impact assessment or consultation in terms of the proposals contained within this report.

Gillian Simpson
Head of Strategy and Governance

17 August 2026

Links to SLLC Objectives

- Organisational Sustainability
- Health and Wellbeing
- Connected and Engaged
- Equality and Inclusion

Previous References

- None

List of Background Papers

- None

Contact for Further Information

If you would like to inspect the background papers, if any, or want further information, please contact:

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SOUTH LANARKSHIRE
Leisure & Culture

Agenda Item
9d

Report

Report to:	**Performance, Finance and Audit Committee**
Date of Meeting:	**17 August 2026**
Report by:	**Gillian Simpson, Head of Strategy and Governance**

Subject:	**Policy Review Proposals and Latest Policy Updates**

1. Purpose of Report

1.1. The purpose of the report is to:

- Present proposals for a structured policy review framework and latest policy updates for consideration by the Performance, Finance and Audit Committee (PFAC).

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendations:

(1) That the proposed new approach to policy review and approval be endorsed and remitted to Board for approval at its meeting on 2 September 2026.
(2) That the new Breastfeeding Policy be endorsed and remitted to the Board for approval at its meeting on 2 September 2026.
(3) That the updated IT Acceptable Use Policy be endorsed and remitted to the Board for approval at its meeting on 2 September 2026.

3. Background

3.1. As noted by this Committee on 11 May 2026, a review has been undertaken to identify all the policies that are currently in place within SLLC and identify those which are SLLC specific polices, and those that are Council Policies which SLLC have adopted. A policy directory and proposed review framework has been established to ensure that all the policies remain relevant, up-to-date and fit for purpose, and that all the appropriate version control mechanisms are in place.

3.2. A structured policy review programme will see policy updates presented more regularly to this committee for consideration. Where there is a material change proposed, or where a new policy has been developed, this will be remitted to the Board for approval.

4. Policy Review Framework

4.1. The SLLC Policy Framework is a structured set of policies, procedures, and guidance that govern how the SCIO leads its workforce. It ensures consistency, legal compliance, fairness, and clarity in expectations for both employees and managers. These are split into three key areas:

- HR Policy
- Information, Governance and Compliance Policy
- Health and Safety Policy

4.2 HR Policy

4.2.1 SLLC do not develop their own policies for HR matters and are under TUPE transfer of staff to the Leisure Trust (now SCIO) tied to all terms and conditions of South Lanarkshire Council (SLC). HR policies are therefore developed and implemented by SLC and adopted by SLLC. The service level agreement outlines that SLC will supply SLLC with all policies and updates as required.

4.2.2 It is proposed that all future HR policy amendments by SLC, once ratified by the Trade Unions, are presented to SLLC's Policy and Strategy Committee for noting and remitted to the Board for oversight and assurance purposes.

4.3 Information, Governance and Compliance Policy

4.3.1 The newly established Compliance Team within SLLC have undertaken a review to identify all the Information, Governance and Compliance (IG&C) policies currently in place within SLLC. As part of this review, consideration was also given as to whether it is appropriate for SLLC to adopt certain Council policies or whether the SCIO should have its own independent policies.

4.3.2 It is proposed that all Information, Governance and Compliance related policy updates and amendments, once ratified by the Trade Unions, are presented to SLLC's Performance, Finance and Audit Committee for consideration and scrutiny, before being remitted to the Board for approval. Where a policy has been reviewed and there are no required amendments, a verbal update will be given at this Committee.

4.3.3 A proposed review schedule has been established for all IG&C policies to ensure that all the policies remain relevant, up-to-date and fit for purpose. The schedule is risk based, in that those policy areas which pose highest risk will be reviewed more frequently than others. Where a gap has been identified, officers will seek to develop a new policy for consideration by this Committee and approval by the SLLC Board. This will ensure consistency, accountability, legal compliance and ensure that the SCIO has all the necessary policy documentation readily available for submitting as part of external funding applications and audits etc.

4.3.4 A list of all current policies and their proposed review schedule is detailed in Appendix 1. The initial programme aims to bring forward two polices for review per Committee/ Board cycle, as outlined below:

Key:
New Policy
Existing Policy

PFA meeting	**Policy 1**	**Policy 2**
May-26	Data Protection Policy *(complete)*	Anti-Fraud Bribery and Corruption Policy *(complete)*
Aug-26	Breastfeeding Policy	ICT Acceptable Use Policy
Oct-26	Complaints Handling Policy	Social Media Policy
Feb-27	Privacy Policy	Retention and Disposal Policy
May-27	Child Protection Policy	Adult Protection Policy
Aug-27	Equality & Diversity	Data Sharing Policy
Oct-27	Information Security Policy	Records Management Policy

4.3.5 A policy directory (SharePoint site) is currently being developed to ensure the full library of policies are held centrally and are easily accessible and retrievable for all employees. This will ensure appropriate version control and internal communication mechanisms are in place.

4.4 Health and Safety

4.4.1 In addition to the above, the SLLC health and safety policy is reviewed annually. The health and safety policy, alongside detailed health and safety procedures and robust risk management and reporting arrangements ensure effective health and safety management across the organisation.

4.4.2 Any proposed amendments to the health and safety policy will continue to be presented to this committee for consideration and remitted to the Board for approval.

5. New Breastfeeding Policy

5.1. South Lanarkshire Council is part of the Breastfeeding Friendly Scotland (BFS) scheme. The National scheme creates a culture where mothers have positive experiences breastfeeding their babies when out and about, and supports businesses, organisations, and public premises in the creation of an environment where breastfeeding is welcomed and protected. In turn, this also contributes to the wellbeing of the South Lanarkshire communities.

5.2. In support of this, South Lanarkshire Leisure and Culture have developed our own Breastfeeding and return to work policy (Appendix 2) for approval and implementation across SLLC facilities.

5.3. The aim of the policy is to ensure that all pregnant and breastfeeding employees are confident that they will be supported to continue breastfeeding on their return to work should they wish to do so, and for customers to feel confident and supported in breastfeeding in any of our facilities.

5.4. As this is a new policy, it is recommended that this is re-mitted to the Board for formal approval.

5. Updated ICT Acceptable Use Policy

5.1 The ICT Acceptable Use Policy was identified as a priority within the policy review programme as it appears to have been some time since it was last reviewed (circa 2009).

5.2 The ICT policy aims to:

- Ensure acceptable use of ICT by all users.
- Establish the parameters of appropriate use and best practice.
- Protect SLLC and users from potential legal liabilities.
- Explain the consequences of breaching acceptable use.

5.3 The ICT Acceptable Use Policy forms part of a broader suite of policies and standards supporting the Information Security Policy.

5.4 The ICT policy has now been reviewed and re-formatted to align with the equivalent South Lanarkshire Council policy. Other amendments include reference to the customer relationship management system; Fusion learn online training modules and the use of artificial intelligence (AI). No other significant changes were identified at this time.

5.5 It is recommended that the updated policy is re-mitted to the Board for formal approval.

6. Next Steps

6.1 This report proposes a new structured approach to policy review and approval, as detailed within section 4. Subject to agreement by this Committee, and subsequent approval by the Board at its meeting on 2 September 2026, the proposed policy review programme and governance arrangements will be implemented thereafter.

6.2 A few minor amendments to the Governance Guide are required to clarify and distinguish between the role of the Policy and Strategy Committee for HR related policies and the Performance, Finance and Audit Committee for all other Information, Governance, Compliance and Health and Safety related policies. This will be incorporated as part of a wider review of the Governance Guide which is scheduled for later this year.

7. Employee Implications

7.1. There are no employee implications arising from the report; however, a robust policy framework not only ensures compliance, but also fosters an environment where employees feel empowered, trusted and valued.

8. Financial Implications

8.1. There are no financial implications arising from the report.

9. Other Implications

9.1. None.

10. Equality Impact Assessment and Consultation Arrangements

10.1. There is no requirement to carry out an impact assessment or consultation in terms of the proposals contained within this report.

Gillian Simpson
Head of Strategy and Governance

17 August 2026

Link to SLLC Objectives

- Organisational Sustainability

Previous References

None

List of Background Papers

- Staff Governance Framework, PFAC 17 August 2026
- South Lanarkshire Council View Article 11 October 2024 Council premises are welcoming to breastfeeding mums - South Lanarkshire View

Contact for Further Information

If you would like to inspect the background papers, if any, or want further information, please contact:

Gillian Simpson, Head of Strategy and Governance
E-mail: gillian.simpson2@southlanarkshireleisure.co.uk

Appendix 1

Policy Name	Last review date	Review period	Next review date
HR Policies – Policy and Strategy Committee			
Addiction Policy	No date recorded	As per SLC	As per SLC
Bereavement Leave	Nov-23	As per SLC	As per SLC
Carers in the workplace	Apr-24	As per SLC	As per SLC
Code of Conduct	Mar-19	As per SLC	As per SLC
Dignity at work	Mar-24	As per SLC	As per SLC
Disciplinary Procedures & Managers Handbook	Sep-11	As per SLC	As per SLC
Domestic Abuse Policy	Jan-14	As per SLC	As per SLC
Enhanced Leave	No date recorded	As per SLC	As per SLC
Flexible Retirement	Feb-26	As per SLC	As per SLC
Flexible Working	Sep-15	As per SLC	As per SLC
Grievance	Jul-11	As per SLC	As per SLC
Maternity/Paternity/Adoption and Shared Leave	Dec-23	As per SLC	As per SLC
Maximising Attendance	Dec-23	As per SLC	As per SLC
Menopause	Jun-23	As per SLC	As per SLC
Mental health and Wellbeing Policy	Apr-14	As per SLC	As per SLC
Performance Management	Oct-16	As per SLC	As per SLC
Recruitment and Selection/Redeployment	No date recorded	As per SLC	As per SLC
Right to disconnect	Sep-22	As per SLC	As per SLC
Schedule of Terms & Conditions of Employment	Apr-23	As per SLC	As per SLC
Special Leave	Mar-23	As per SLC	As per SLC
Stress in the Workplace	Oct-23	As per SLC	As per SLC
Breast Feeding	Aug-26	As per SLC	As per SLC
Health and Safety – Performance, Finance and Audit Committee			
Health Safety Policy	Jan-26	Annual	Jan-27
Information, Governance and Compliance – Performance, Finance and Audit Committee			
Equality & Diversity	Sep-22	3 Years	Aug-27
Code of Corporate Governance	2024	3 Years	Apr-27
Complaints Handling	Mar-13	3 Years	Oct-26
Cookies Policy	No date recorded	2 Years	Oct-26
Data Sharing Policy	No date recorded	2 Years	Aug-27
ICT Acceptable Use	No date recorded	2 Years	Aug-26
Information Security	Jul-23	3 Years	Oct-27
Privacy (Employees)		2 Years	Feb-27
Privacy notice	Feb-25	2 Years	Feb-27
Records Management Policy	Jul-23	3 Years	Oct-27
Retention and Disposal	Jan-22	3 Years	Feb-27
Safeguarding Policy Adults	Mar-25	2 Years	May-27
Safeguarding Policy Children	Mar-25	2 Years	May-27

Smoking Policy	Sep-15	5 Years	Feb-27
Data Protection	May-26	2 Years	May-27
Anti-Fraud Bribery and Corruption	May-26	3 Years	May-29
Volunteering	Nov-16	3 Years	Feb-28

Appendix 2

South Lanarkshire Leisure and Culture

The Breastfeeding and Return to Work Policy

Document control	
Title	Breastfeeding and Return to Work Policy
Owner	[redacted] Compliance Officer
Author	[redacted] Employee Wellbeing Adviser (SLC)

Version	Approved	Date approved	Review Date
1			

1. **Policy Statement**

South Lanarkshire Leisure and Culture (SLLC) recognises the short-term and long-term health advantages of breastfeeding for both mother and baby and supports breastfeeding as the optimal infant feeding choice for all parents. SLLC, therefore, takes a positive and supportive attitude where employees choose to breastfeed on their return to work.

SLLC also recognises that breastfeeding is not always a choice and understands the sensitivities around this issue. SLLC is committed to supporting the well-being of all its employees and will signpost to support/resources for all infant feeding circumstances.

Please note, while this document uses the word mother to describe the parent who is breastfeeding, we acknowledge and respect that there are parents who are breastfeeding who may have a gender identity other than female and may use terms other than 'mother' to describe themselves.

2. Aims

2.1. The aim of the policy is to ensure that all pregnant and breastfeeding employees are confident that they will be supported to continue breastfeeding on their return to work should they wish to do so, and for customers to feel confident and supported in breastfeeding in any of our facilities. To support this aim SLLC will:

- provide managers with guidance on how to support individuals who choose to breastfeed when returning to work after maternity leave.
- signpost information/resources to pregnant employees on the benefits of breastfeeding and how to access breastfeeding support.
- as far as is reasonably practicable, ensure all our premises are breastfeeding friendly to allow individuals to feel comfortable to breastfeed. Ensure staff are trained on the Breastfeeding friendly Scotland (BFS) Scheme.
- encourage a culture which supports employees who choose to continue breastfeeding once back at work.

3. Scope

3.1. This policy applies to all employees, customers and visitors of SLLC to ensure understanding, encouragement and support of those mothers who intend to breastfeed.

4. Roles and Responsibilities

4.1 In order to ensure fair and consistent application of the policy and create a supportive culture towards breastfeeding, roles and responsibilities are outlined below.

4.2 **Chief Executive and Heads of Service**

- Support requests related to breastfeeding and supply the necessary facilities where reasonably practicable.
- Ensure managers and employees are aware of the Breastfeeding and Return to Work policy.
- Uphold an organisational culture that supports breastfeeding and return to work.

4.3 **Line Managers**

- Familiarise themselves with the Breastfeeding and Return to Work Policy.
- Ensure employees are aware of the Breastfeeding and Return to Work policy before starting maternity leave.
- If the employee has confirmed their intention to breastfeed, discuss breastfeeding. arrangements with the employee before they return to work. This allows time for reasonable adjustments and practical arrangements to be considered and put in place effectively.

- Refer to FOP'4 New and Expectant Mothers and review the existing individual risk assessment carried out before an employee returns from maternity leave. Review this with the employee to identify any particular risks, that need to be considered, in relation to the arrangements put in place for the employee to continue breastfeeding.
- If the employee does not wish to return to work on a full time basis, flexible working must be discussed and seriously considered in line with the flexible working policy. Explore and consider all possible options to alter the employee's work pattern. Advice should be sought from Personnel Services as required.
- Ensure that all agreed adjustments are recorded and adhered to.
- Ensure ongoing wellbeing conversations take place regularly and set regular review dates.

4.4 **Employees**

- The employee should inform their line manager, if they intend to continue breastfeeding, 8 weeks before they return to work. (See notification requirements below)
- Follow any safety arrangements implemented for their protection.
- All employees should be familiar with this policy to assist with any support and safety arrangements that are put in place for any colleague who is breastfeeding.
- Where an employee's role involves interaction with the public, they should be able to assist or signpost breastfeeding mothers who may require support. They shall support mothers to feel comfortable about breastfeeding in any of our facilities. There is no requirement to provide a private space, however employees should try and support this if requested.
- All employees must understand it is discriminatory, unlawful and an offence to stop or prevent someone from breastfeeding a child in a public place.

5. Legislation

5.1 There is a range of legislative requirements that protects an employee's right to breastfeed in their place of work. (Appendix 1).

6. Notification Requirements

6.1 Employees should complete their maternity leave details via Fusion, under the time and absence section.

6.2 Employees are required to confirm their return to work date to their manager, by providing 8 weeks' notice before their return date. At this time, if the employee intends to breastfeed or express during working hours, they should inform their manager. This will allow the manager to have a supportive discussion with their employee, about what reasonable adjustments need to be considered, to enable the employee to continue breastfeeding on return to work.

7. Risk Assessment and Return to Work Arrangements

7.1 The new and expected mothers risk assessment must be carried out by the manager, with the employee during their pregnancy. It must be reviewed in advance of the employee's return to work, in consultation with the employee, to take account of any specific risks and needs of mothers who intend to breastfeed/express while at work. Reviewing the risk assessment will ensure that employees return to a healthy and safe work environment, and with agreed adjustments in place. Advice and guidance can be provided by Personnel Services.

7.2 As the manager and employee review the risk assessment, part of the discussion will also include considering practical arrangements that may be needed to provide a supportive return to work for the employee.

7.3 A helpful discussion may involve considering flexible working hours; times and arrangements for feeding/expressing milk; other reasonable adjustments. Reasonable time will be allowed during working hours to express milk. This in practice could mean agreeing extended lunch and/or other breaks, starting slightly later in the morning or leaving early in the evening, depending on the service provision and within the context of the flexible working options available.

7.4 As required, the manager must also provide facilities to allow mothers to express and store milk at work e.g. access to a refrigerator and a private clean space to breastfeed/express.

7.5 Any temporary or permanent adjustments agreed between the employee and their line manager must be confirmed in writing. It is also important to agree a review date at this meeting to evaluate the arrangements made as part of continued support.

8. Complaints

8.1 Any employee who disagrees with any decisions made by their line manager in relation to the application of this Policy may raise a grievance under the SLLC's Grievance Procedure.

9. Links to other policies/documents

9.1 This policy is linked to:

- Flexible Working Policy
- Maternity, Adoption, Paternity Leave, Additional Paternity Leave, Shared Parental Leave and Pay Policy.
- Grievance procedure
- Dignity at Work policy

10. Further Sources of Information/Support and External Links

- All employees can access counselling through the council's Employee Assistance Provider, **PAM Assist** by calling **0800 882 4102**. All calls are free, confidential and available 24 hours, 7 days a week throughout the year.
- Physiotherapy can be accessed by management referral as part of the council's physiotherapy arrangements, or NHS facilities are available via the employee's GP or NHS Lanarkshire self-referral.
- www.nhsinform.scot/ready-steady-baby
- www.laleche.org.uk

Appendix 1: Legislation

The Breast Feeding etc (Scotland) Act 2005
Under this Act, it is illegal to stop a mother feeding her child under the age of 2 years, either by breastfeeding or bottle feeding, in premises where the public have general access (including premises if the child is lawfully permitted to be there).

The Equality Act 2010 (Amendment) Regulations 2023
Confers the same protection for breastfeeding children over the age of 2 years supporting families for the duration of feeding. Any person who deliberately stops or attempts to stop a person from feeding a child in these circumstances will be guilty of an offence, which could lead to a conviction.

EU Council Pregnant Workers Directive 92/85/EEC
If an employee's work affects their ability to breastfeed, an employer must temporarily alter their working conditions and/or hours or give alternative work to allow them to continue breastfeeding. This will require employers to be flexible about breaks and other working conditions.

Management of Health & Safety at Work Regulations 1999 (SI 1999 No 3242).
The regulations require that risks should be assessed, and control measures put in place where new mothers are at greater risk than other workers where new mothers are at greater risk than other workers because of their condition. Particular hazards to be considered are any physical, biological or chemical agents.

Workplace (Health, Safety & Welfare) Regulations (S1 1992 No 3004).
These regulations state that employers have a specific duty to provide suitable rest facilities for nursing parents.

Personal Protective Equipment (PPE) at Work Regulations 1992 (SI 1992 No 2966).
Physiological changes while breastfeeding may affect the ability of the nursing parent to wear PPE correctly and comfortably and may therefore reduce the level of protection PPE is designed to offer.

Control of Substances Hazardous to Health Regulations 1994 (SI 1994 No 3246) plus Approved Codes of Practice on Control of Biological Agents, Chemicals (Hazard Information & Packaging Regulations 1994) (SI 1993 No 1746).
These regulations highlight that the exposure limits to certain biological or chemical agents must be at a lower level for nursing parents.

Ionising Radiations Regulations 1999 (SI No 3232)(IRR99).
Special attention must be given to ensure new mothers are not employed in work where there is a high risk of radioactive contamination.

Control of Lead at Work Regulations 1980 (SI 1980 No 1248).
Exposure for breastfeeding mothers should be viewed with concern.

Equality and Human Rights Act Scotland
Nursing parents may be able to bring claims for breaches of their rights if they are prohibited from breastfeeding in the workplace.

If you need this information in another language or format, please contact us to discuss how we can best meet your needs. Phone 0303 123 1015 or
email customer.services@southlanarkshireleisure.co.uk.

Appendix 3

ICT Acceptable Use Policy

For South Lanarkshire Leisure and Culture employees

Contents

Purpose

South Lanarkshire Leisure and Culture (SLLC) aims to help employees make the best use of the Information Communication Technology (ICT) systems and facilities. The use of ICT can bring significant benefits to our activities and delivery of services. However, it can also introduce significant types of risk to our operations. The aim of this policy is to provide a safe framework for using ICT without exposing South Lanarkshire Council (the council), SLLC or our employees to the risks which can come with its use.

This policy has been developed to: -

- Ensure acceptable use of ICT by all users.
- Establish the parameters of appropriate use and best practice.
- Protect the council, SLLC and users from potential legal liabilities.
- Explain the consequences of breaching acceptable use.

The ICT Acceptable Use Policy forms part of a broader suite of policies and standards supporting the Information Security Policy. Key related documents include the SLLC Record of Processing Activities (RoPA), the Retention Schedule, and SDR'155 Information Security Incident Preliminary Notification Procedure.

This policy applies to all employees of South Lanarkshire Leisure and Culture, to third party organisations or contractors and to anyone else who is authorised to access and use the ICT facilities, systems and services either at a SLLC facility or accessing remotely. For the purpose of this policy "employees" includes full-time, part-time, term-time and any temporary staff. This policy applies to assets owned or leased by South Lanarkshire Council or to devices that connect to a South Lanarkshire Council network or reside at a South Lanarkshire Council site.

This policy also applies to devices and networks used by SLLC that are independent of South Lanarkshire Council network.

The policy relates to the use of: -

- internal telephone systems.
- all computers including portable computers.
- all mobile communications devices such as tablets, smartphones and mobile phones.
- all storage devices such as memory sticks, external hard drives and digital cameras.
- ICT systems such as business applications, email and internet browsing.
- CRM systems.

Responsibilities

a) Heads of Service

The Heads of Service have a specific responsibility for the implementation and adherence to SLLC's policies within their respective Service.

b) Line Managers / Supervisors

Line managers and supervisors have a responsibility to ensure that:

- All employees within their teams are aware of and follow the terms of the policy and guidelines.
- Employees are made aware that emails, phone calls, internet usage and any electronic communication may be monitored
- New employees are provided with the necessary information and training as part of the induction process.
- Appropriate ongoing training in the use of new ICT systems is provided to SLLC employees.
- Consideration is given to training requests in relation to the use of the council's and SLLC ICT systems.

c) Employees

Employees have a responsibility to:

- familiarise themselves with the terms of the policy.
- adhere to the terms of the policy and the supporting guidance material.
- undertake training as advised by their Line Manager

d) Third Parties

Managers with responsibility for relationships with third parties who use council or SLLC ICT systems must ensure that they are aware of the requirement to comply with this policy. Contracts being drawn up must reflect the requirement to comply with SLLC security policies to include but not limited to the ICT Acceptable Use Policy.

e) Training and Awareness

It is essential that users are given sufficient information and training to assist with compliance of the terms of this policy.

- a copy of this policy will be available to all users of ICT system.
- all ICT users must complete mandatory online learning – Employee Guide to the IT Acceptable Use Policy

To further reinforce the key policy requirements, further mandatory online learning is available.

Code of Conduct- data protection and you
Good Governance – Information security
Information Governance- An Introduction
Introduction to Data Protection – 2018
Email and Online Risk
Email Safety
Cyber Security -stay safe online
Information security

Risks and regulatory compliance

Regulatory and compliance requirements mean SLLC is required to comply with legislation, such as the UK GDPR, the updated DUAA and many others. At all times users should act in such a manner as to protect the confidentiality of the information being processed in accordance with UK GDPR and the updated DUAA. Further guidance on the requirements of data protection can be found in the following document: South Lanarkshire Leisure and Culture Data Protection Policy

The ICT Acceptable Use Policy incorporates the main principles of relevant legislation, and this legislation is listed in the policy guidelines. There is also a requirement for compliance with a variety of Codes of Connection as a pre-condition for sharing information with government departments or other public bodies.

Similarly, SLLC's automated payments collections processes are governed by the Payments Card Industry Data Security Standard (PCI DSS). The obligation is on South Lanarkshire Leisure and Culture to demonstrate and provide evidence of compliance for all of these regulations. The contents of this policy form part of the overall compliance requirements for SLLC.

General requirements

Employees are responsible for exercising good judgment regarding appropriate use of SLLC's resources in accordance with their policies, standards, and guidelines. SLLC resources may not be used for any unlawful or prohibited purpose.

For security, compliance, and maintenance purposes, authorised personnel may monitor and audit equipment, systems, and network traffic. Devices that interfere with other devices or users on the South Lanarkshire Council or South Lanarkshire leisure and Culture network may be disconnected. Information security prohibits actively blocking authorised audit scans. Firewalls and other blocking technologies must permit access to the scan sources.

System accounts

Employees are responsible for the security of data, accounts, and systems under your control. Keep passwords secure and do not share account or password information with anyone, including other personnel, family, or friends. Providing access to another individual, either deliberately or through failure to secure its access, is a violation of this policy.

Employees must maintain system-level and user-level passwords in accordance with SLC Password Policy.

Employees must ensure through legal or technical means that proprietary information always remains within the control of South Lanarkshire Leisure and Culture. Conducting South Lanarkshire Leisure and Culture business that results in the storage of proprietary information on personal or non- South Lanarkshire Leisure and Culture controlled environments, including devices maintained by a third party with whom we do not have a contractual agreement, is prohibited. This specifically prohibits the use of an email account that is not provided by South Lanarkshire Council, or its customer and partners, for company business.

Computing assets

Employees are responsible for ensuring the protection of assigned South Lanarkshire council and South Lanarkshire Leisure and Culture assets, especially when working away from company locations. Employees are responsible for protecting company equipment issued to them. They should ensure that:

- Devices left at South Lanarkshire Leisure and Culture facilities overnight must be properly secured.
- When using computing and communication facilities outside of the secure office environment, special care should be taken to ensure that information is not compromised.
- Protection must be in place to avoid unauthorised access to or disclosure of information including ensuring your screen cannot be seen by others and that equipment is not left unattended.
- Devices should never be left unattended in any vehicles.
- Any theft of company assets, or deliberate or wilful damage to company assets, should normally be reported to the Police, the IT Service Centre. (ext. 5656) and to SLLC's IT and Administration Manager.

All PCs, PDAs, laptops, tablets, smartphones and workstations must be secured with a password-protected screensaver with the automatic activation feature set to 10 minutes or less. You must lock the screen or log off when the device is unattended.

Do not interfere with corporate device management or security system software, including, but not limited to, antivirus, web monitoring, encryption etc.

All South Lanarkshire Council assets remain the property of the council. All South Lanarkshire Leisure and Culture assets remain the property of SLLC. Any user who leaves employment / engagement is required to return all hardware and software assets that has been provided to them on or before their last day of employment as directed by their line manager.

Network use

Employees are responsible for the security and appropriate use of South Lanarkshire Council and South Lanarkshire Leisure and Culture network resources under your control. Using these resources for the following is strictly prohibited:

- causing a security breach to either South Lanarkshire Council or other network resources, including, but not limited to, accessing data, servers, or accounts to which you are not authorised; circumventing user authentication on any device; or sniffing network traffic.
- causing a disruption of service to either South Lanarkshire Council, South Lanarkshire Leisure and Culture or other network resources, including, but not limited to, ICMP floods, packet spoofing, denial of service, heap or buffer overflows, and forged routing information for malicious purposes.
- introducing honeypots, honeynets, or similar technology on the South Lanarkshire Council or South Lanarkshire Leisure and Culture network.
- violating copyright law, including, but not limited to, illegally duplicating or transmitting copyrighted pictures, music, video, and software.
- exporting or importing software, technical information, encryption software, or technology in violation of international or regional export control laws.
- use of the internet or South Lanarkshire Council network that violates the South Lanarkshire Council and South Lanarkshire Leisure and Culture policies, or local laws.

- intentionally introducing malicious code, including, but not limited to, viruses, worms, Trojan horses, email bombs, spyware, adware, ransomware and keyloggers.
- port scanning or security scanning on a production network unless authorised in advance by Information Security.
- the use of network bridging / connectivity networks

Internet and intranet

The Internet and Intranet are fast and effective electronic means of communicating and gathering information that can enhance the efficiency and effectiveness of staff in South Lanarkshire Council and South Lanarkshire Leisure and Culture.

- The intranet is a class of website that is internal to the South Lanarkshire Council that will provide access to a wide range of council information which can be classed as safe and verified. South Lanarkshire Council will use these facilities to communicate and cascade information throughout the organisation. Staff are encouraged to familiarise themselves with the facilities and to make use of South Lanarkshire's Intranet site. South Lanarkshire Leisure and Culture staff also have access to the intranet.
- The internet is a class of website that is external to the council and South Lanarkshire Leisure and Culture which provides a wide-ranging source of information and knowledge but offers no guarantee of accuracy, reliability and authenticity. Internet facilities employ complex technology which is not guaranteed to be 100% available and staff should not rely wholly and solely on them for critical business.

Unacceptable use

Access to websites that contain inappropriate material is strictly forbidden, e.g. pornography, instruction on criminal or terrorist skills, adult themed chat sites, promotion of cults, gambling, content or statements of a nature which are liable to cause offence to others (this list is not exhaustive), or any other material likely to bring South Lanarkshire Leisure and Culture into disrepute.

Personal use

Limited personal use of Internet facilities is permitted, during scheduled breaks and with permission of Line Managers, provided that the material accessed is appropriate and is not potentially offensive to others. The use of the Internet for personal transactions only, such as booking reservations or tickets or the purchase of any goods or services for personal use, is permitted. Employees should regard this facility as a privilege that should not be abused and should normally be exercised in their own time and without detriment to the job. Inappropriate or excessive use may result in disciplinary action and / or removal of facilities. Staff should be aware that Internet access will be subject to monitoring.

Blocking of inappropriate content

South Lanarkshire Council employs software to enable the blocking of sites, the content of which is deemed inappropriate, or where access may cause excessive use of bandwidth. Attempts to access web sites that display inappropriate content will be logged by the system and may result in disciplinary action being taken against the individual concerned up to and including dismissal.
All use of the Internet will be logged by the system and monitored.
Where an employee identifies a site that has been blocked that they require access to as part of their work, they can make a request to have the site opened for use via their Line Manager.

Electronic communications

At South Lanarkshire Leisure and Culture, communication plays an essential role in the conduct of our business. How you communicate with people not only reflects on you as an individual but also on South Lanarkshire Leisure and Culture. We value your ability to communicate with colleagues, local authorities, customers and outside bodies, and we invest substantially in information technology and communications systems which enable you to work more efficiently.

All electronic communications should be conducted in line with South Lanarkshire Leisure and Cultures Corporate Standard's which can be accessed by clicking the following LINK

In line with Corporate Standards the following use is strictly forbidden

- inappropriate use of communication vehicles and equipment, including, but not limited to, supporting illegal activities, and procuring or transmitting material that violates South Lanarkshire Leisure and Cultures policies against harassment or the safeguarding of confidential or proprietary information.
- sending Spam via email, text messages, instant messages, voice mail, or other forms of electronic communication.
- forging, misrepresenting, obscuring, suppressing, or replacing a user identity on any electronic communication to mislead the recipient about the sender.
- posting the same or similar non-business-related messages to large numbers of Usenet newsgroups (newsgroup spam).
- use of a South Lanarkshire Leisure and Culture email or IP address to engage in conduct that violates South Lanarkshire Leisure and Culture policies or guidelines. Posting to a public newsgroup, bulletin board, or listserv with a South Lanarkshire Leisure and Culture email or IP address represents South Lanarkshire Leisure and Culture to the public; therefore, you must exercise good judgment to avoid misrepresenting or exceeding your authority in representing the opinion of South Lanarkshire Leisure and Culture.

Telephone and voicemail services

As with all South Lanarkshire Leisure and Culture resources, the use of telephones and voicemail should be as cost effective as possible and in keeping with the best interests of South Lanarkshire Leisure and Culture. All employees must operate within the following basic policy guidelines.

Acceptable use

- All telephones, telephony equipment, voicemail boxes, and messages contained within voicemail boxes are the property of South Lanarkshire Council or South Lanarkshire Leisure and Culture.
- IT Services is responsible for installation and repair of all South Lanarkshire Council telephony equipment and administration of telephone and voicemail accounts.
- Line Managers and or supervisors are responsible for overseeing telephone and voicemail use and ensuring policy compliance, as well as ensuring that IT Services are notified of any adds, moves, or changes required to telephone or voicemail services.
- The number of telephone calls made should be limited in number and duration to that necessary for effective conduct of business.
- All voicemail boxes will be protected with a PIN (personal identification number), PINs must not be shared with others.

- Voicemail is to be used as a backup in the event you are not available to answer a call and should not be used to “screen” calls. Each user is expected to respond to voicemail messages in a timely manner.
- If you will be away from the office for more than one business day, you are expected to change your voicemail greeting to reflect this fact and direct callers to alternate contacts if applicable.

Unacceptable use

- Transmitting obscene, profane, or offensive messages.
- Transmitting messages or jokes that violate our harassment policy or create an intimidating or hostile work environment.
- Using the telephone system or breaking into a voicemail box via unauthorised use of a PIN or other password.
- Broadcasting unsolicited personal views on social, political, or other non-business-related matters.
- Soliciting to buy or sell goods or services unrelated to South Lanarkshire leisure and Culture.
- Calling chargeable phone numbers.
- Making personal long-distance phone and or international calls without managerial approval.

Customer Relationships Management (CRM) Systems *(Front of House booking systems)*

As with all South Lanarkshire Leisure and Culture resources, the use of the Customer Relationship Management (CRM) system should be undertaken in a secure, responsible, and efficient manner, and in keeping with the best interests of South Lanarkshire Leisure and Culture. All employees must operate within the following basic policy guidelines.

Acceptable use

- The CRM system, all associated data, records, and outputs are the property of South Lanarkshire Council or South Lanarkshire Leisure and Culture.
- IT Services is responsible for the administration, maintenance, and security of the CRM system, including user account management and system access controls.
- Line Managers and/or supervisors are responsible for overseeing CRM usage and ensuring policy compliance, as well as ensuring that appropriate access is requested, amended, or removed in a timely manner.
- Access to the CRM system must be based on business need and limited to the minimum level required to perform job responsibilities (least privilege principle).
- All data entered into the CRM system must be accurate, relevant, and recorded in a timely manner to support business operations.
- Users must ensure that personal and sensitive data is handled in accordance with data protection legislation and organisational policies.
- User accounts must be kept secure; passwords must not be shared and users must not allow others to access the system using their credentials.
- The CRM system must only be used for legitimate business purposes and in support of South Lanarkshire Leisure and Culture activities.
- Any errors, suspected data breaches, or system issues must be reported promptly to the IT Service Desk and/or Line Manager.
- Users must log out of the CRM system or lock their device when it is unattended to prevent unauthorised access.

Unacceptable use

- Accessing, amending, or deleting CRM records without a legitimate business reason.
- Entering false, misleading, inappropriate, or offensive information into the CRM system.
- Using the CRM system to access personal data for non-business purposes or for personal interest.
- Sharing CRM data with unauthorised individuals or external parties without appropriate approval.
- Exporting, downloading, or copying data from the CRM system to unauthorised locations, devices, or applications.
- Attempting to bypass system controls, access restrictions, or security mechanisms.
- Using another user's login credentials or allowing others to use your account.
- Retaining CRM data outside approved systems longer than necessary or in breach of retention requirements.
- Any use of the CRM system that breaches data protection legislation, organisational policies, or could bring South Lanarkshire Leisure and Culture into disrepute.

Artificial Intelligence (AI) Tools

As with all South Lanarkshire Leisure and Culture resources, the use of Artificial Intelligence (AI) tools must be undertaken in a secure, responsible, and controlled manner, and in keeping with the best interests of South Lanarkshire Leisure and Culture. All employees must operate within the following basic policy guidelines.

Acceptable use

- Only AI tools approved by South Lanarkshire Leisure and Culture may be used for business purposes. Currently, this is limited to Microsoft Copilot accessed through an authorised company account.
- All AI-generated content must be reviewed and verified for accuracy, relevance, and appropriateness before being used in any business context.
- Employees remain responsible and accountable for any content produced, decisions made, or actions taken using AI tools.
- AI tools should be used to support business activities and must not replace professional judgement or established processes.
- No personal data, sensitive information, or confidential organisational data should be input into AI tools unless the system has been explicitly approved for such use.
- Access to AI tools must be via secure, authorised systems and in line with South Lanarkshire Council and South Lanarkshire Leisure and Culture ICT security requirements.
- Line Managers and/or supervisors are responsible for overseeing AI usage within their teams and ensuring compliance with this policy.
- Any concerns regarding AI outputs, data handling, or potential breaches must be reported to the IT Service Desk and/or Line Manager.

Unacceptable use

- Using non-approved AI tools (including personal accounts or external AI platforms) for any South Lanarkshire Leisure and Culture business purpose.
- Inputting personal data, sensitive data, or confidential information into AI tools that have not been approved for such use.

- Relying on AI-generated content without appropriate review, validation, and human oversight.
- Using AI tools to generate or distribute content that is inaccurate, misleading, offensive, or in breach of organisational policies.
- Using AI tools to circumvent South Lanarkshire Council or South Lanarkshire Leisure and Culture controls, policies, or procedures.
- Uploading, storing, or processing organisational information within AI tools in a manner that breaches data protection, retention, or information security requirements.
- Misrepresenting AI-generated content as original human-authored work where this could mislead colleagues, customers, or stakeholders.

Data storage

South Lanarkshire Leisure and Cultures information assets should always be stored and accessed from an approved location where it is physically secure and is routinely backed up. Information should also be stored throughout its existence in an environment suited to its format and security classification, to ensure its preservation from physical harm or degradation and its security from loss or unauthorised access.

Information held in digital formats should be managed and stored in such a way as to ensure usability and accessibility through time. This may involve migration of information between environments and systems, conversion to current software versions, or conversion from obsolete to current formats. Protection from unauthorised access may require mechanisms such as password protection or encryption of digital files and data.

Removing company information from its network location should not be considered unless there is a valid business case for doing so. Information, whether original or duplicate, should never be kept outside corporate systems (e.g. on PC hard drives, on CDs or other removable media) except as a temporary off-line copy driven by a business need to work off-site or off-line, or for authorised transfer to other users or systems. The risk of losing this information must be considered and if necessary appropriate precautions enforced. For avoidance of doubt, you must liaise with your direct manager and consider if a security risk assessment is required.

Removable media

There is a significant security risk associated with the use of removable media that could hold large data sets of either personal identifiable information or sensitive data. Data that is held only in one place and in one format is at much higher risk of being unavailable or corrupted through loss, destruction or malfunction of equipment than data which is frequently backed up. Therefore, removable media should not be the only place where data obtained for business purposes is held. Copies of any data stored on removable media must also remain on the sources system or networked drive until the data is successfully transferred to another networked drive or backup/archive medium.

Under exceptional circumstances utilisation of removable media may be approved with the controls below being applied:

- removable media must be approved by IT Services and the IT and Administration Manager
- removable media should not be used to replace network storage.
- South Lanarkshire Leisure and Culture data must be encrypted if it is to be taken outside the normal location of that information.

- South Lanarkshire Leisure and Culture data must be encrypted if it is to be left unattended by an authorised user of that data.

Retain a temporary copy of an individual record to allow work to be done remotely. If this is done the temporary copy must be returned to network storage and the temporary copy destroyed as soon as possible.

Software

Computer assets and or mobile devices are provided pre-configured to enable business applications to be run. A standard set of end user computer software products is available, chosen to provide a balanced and up-to-date coverage of most business needs. It is continually reviewed to keep in step with advances in technology. You should consult with Information Technology Team to evaluate your end user computing software needs. If a business application is needed, again you should contact your IT Team to discuss your needs. IT will ensure that all technical considerations relating to your desktop, laptop, tablet and or smartphone are addressed.

Any additional software which is deemed as appropriate and required for an employee to fulfil their role must be approved and installed by Information Technology Services. Employees must not install, move, or copy software, change any system files or duplicate copyright document images. All software must be registered for council use by Information Technology Services. Licensing agreements require that software is used only on the equipment for which it is authorised.

Policy compliance

If any user is found to have breached this policy, they may be subject to South Lanarkshire Leisure and Culture's disciplinary procedure up to and including dismissal. If a criminal offence is considered to have been committed further action may be taken to assist in the prosecution of the offender(s). If you do not understand the implications of this policy or how it may apply to you, seek advice from your Line Manager

Review and revision

This policy will be reviewed as it is deemed appropriate, but no less frequently than every 2 years. Policy review will be undertaken by IT or Strategy and Governance Team.

Version	Date Approved	Approved By	Summary of Changes	Review Period	Next Review Date
4.5		SLLC Board	New format to align with SLC. Inclusion of CRM and Fusion LOL training	2 years	September 2028

If you need this information in another language or format, please contact us to discuss how we can best meet your needs. Phone 01698 476262 or email customer.services@southlanarkshireleisure.co.uk

Agenda Item
10

NOMINATIONS COMMITTEE UPDATE

1. There have been various meetings of the Nominations Committee since the last Board Meeting as follows:

Chair / Trustee Shortleeting - 3 June 2026
As noted at the Nominations Committee on 12 January 2026, the current Board Chair elected to removed themselves from the new Chair recruitment process. The shortleeting process was therefore chaired by Councillor Devlin as Vice Chair of SLLC. A verbal update on the outcome of this meeting was given to the Board on 3 June 2026, and as previously noted, Angela Beggan attended in place of Chris Goudie, who was unable to make the meeting.

Chair Interviews – 11 June 2026
Following the resignation of Councillor Devlin on 4 June 2026, Councillor Razzaq was nominated to chair the interview panel for the incoming Chair. This was approved by the Board on 3 June 2026. It was agreed by the Board that Angela Beggan would also sit on the panel to ensure a gender balance.

Trustee Interviews – 3 August 2026
The Board Chair was reinstated as Chair of the Nominations Committee for the purposes of the Trustee interviews. To ensure consistency, Councillor Razzaq also attended these interviews.

Elected Member Trustees – 4 August 2026
The Committee met to consider the recommendations from the Council's Executive Committee on 24 June 2026 as follows:
- Councillor Cowie to replace Councillor Devlin as a Trustee of South Lanarkshire Leisure and Culture Board
- Councillor Razzaq to be appointed as the new Vice-Chair of South Lanarkshire Leisure and Culture Board
- No nominations were sought to fill the remaining vacant trustee positions for elected members or officers of the Council

2. Any decisions/approvals taken to highlight:

- The Board is asked to approve the following recommendation from the Nominations Sub-Committee:

(1) That Melinda Johnson be nominated for the position of Chair of SLLC;
(2) That Kirsty Burns be nominated for the vacant independent Trustee position
(3) That recommendations (1) and (2) above be forwarded to the Council for formal approval at the Council's Executive Committee on 16 September 2026.
(4) That subject to Council approval, formal appointment of the new Chair and Trustee will take place at the AGM on 18 November 2026.
(5) That Councillor Cowie replaces Councillor Devlin as a Trustee of SLLC Board, be noted
(6) That Councillor Razzaq be appointed as the new Vice-Chair of SLLC, be approved

3. Any risks identified to highlight:

- The Nominations Committee wish to recommend that a risk be added to the risk register in relation to Elected Member representation on the SLLC Board, with only 3 of the 5 Elected Member Trustee positions currently being filled.

SOUTH LANARKSHIRE
Leisure & Culture

Agenda Item
12

Report

Report to:	**Board of Trustees**
Date of Meeting:	**2 September 2026**
Report by:	**Ross McKie, Head of Corporate Services**

Subject:	**Revenue Budget 2026/27 – Quarter 1 Update**

1. Background

1.1. The purpose of the report is to:

- Update the Board on the most recent 2026/27 budget monitoring position as at 30 June 2026.
- Update the Board on the current projected outturn for financial year 2026/27.

2. Recommendations

2.1. The Board is asked to approve the following recommendation:

(1) That the content of the report be noted.

3. Background

3.1. This report follows a previous report to the Board on 3 June 2026 regarding the 2026/27 budget.

3.2. This report provides an update on the 2026/27 budget monitoring position as at 30 June 2026 following a robust review of income and expenditure to date across all service areas of South Lanarkshire Leisure and Culture (SLLC).

4. Position as of 30 June 2026

4.1. As at 30 June the SLLC budget has an overspend position of (£0.190m) which is further detailed in Appendix 1.

4.2. This relates to an expenditure underspend of £0.151m. This primarily relates to underspends in staffing costs of £0.232m, in relation to SPA, Halls and Outdoors. Offset by overspends in supplies and services of (£0.107m) relating overspends of (£0.164m) in IT systems costs and underspends of £0.047m in general supplies across SPA. Within financing charges, there is an underspend of £0.063m in relation to the Repairs & Renewal (R&R) fund which is being used to support concurrency costs whilst SLLC transfers to its new front of house management system.

4.3. Income overall is currently showing an under recovery of (£0.341m), which is mainly attributable to SPA and an under recovery of (£0.250m) primarily related to membership income. There are under recoveries in ACE of (£0.052m) due to membership and pay as you go income and outdoor of (£0.106m) related to Calderglen and the realignment to take place for Golf in relation to the transfer of Hollandbush. These under recoveries have been partially offset by over recoveries in income related to Venues of £0.052m for hires and bar income.

5. Projected Outturn Position for 2026/27

5.1. The Quarter 1 position suggests that current income levels are tracking below budget assumptions and may result in a shortfall by year end if trends continue. Based on equivalent overspends in the remaining quarters, the potential overall overspend could be in the region of (£0.760m). It should be noted that there is uncertainty around what the level of property costs which SLLC operate and this will have the potential to increase this outturn further.

5.2. Early analysis has indicated that overspend is driven by a projected under recovery of £0.490m related to the revised target membership income as detailed in Table 1.

Table 1 – 2026/27 Membership Income

	Budget	Projection	Variance	Target	Current	Variance
H&F Adult	(£4.668)	(£4.235)	(£0.433)	11,998	10,886	1,113
H&F Junior	(£0.550)	(£0.498)	(£0.051)	3,031	2,747	284
Activeage	(£1.518)	(£1.509)	(£0.009)	10,123	10,061	62
Swim	(£3.168)	(£3.195)	£0.027	7,750	7,816	(66)
ACE	(£0.228)	(£0.205)	(£0.023)	700	629	71
Total	(£10.133)	(£9.643)	(£0.490)	33,602	32,138	1,464

Based on benchmarking information and previous market research, there was an expectation that additional investment in our gym estate would have seen a rise in members and the period they remain members. Whilst there have been significant overall increases in some areas, namely Activeage, the anticipated gains in our primary membership income group, Health and Fitness Adult memberships, has not transpired. There are a number of environmental factors which could be contributing to this position, including the increasing competition from private and value gyms, continual cost of living pressures on household incomes, and the unusually good weather that appears to have an impact on the leisure sector.

5.3. The current forecast indicates that available reserves will be fully committed in addressing the projected overspend. A range of mitigating actions has been identified to reduce the financial pressure and improve the year-end position, with the estimated impact of each action outlined below.

- **Staffing vacancies:** Consideration of holding recruitment £0.194m - It is recognised that this could potentially impact on service provision and increase pressures on the existing workforce.
- **Marketing**: Where there is significant probability of a net financial benefit, implementation of additional marketing, use of grant funding, including restricted where possible or revenue generating activities.
- **Growth:** Accelerating and maximising income growth activities £0.250m - The includes optimising spaces for letting and activity growth, proactive pursuit of sponsorship opportunities and quantifying the potential income benefit that one off grant funding provides.
- **Efficiency:** Reduction in shared facility expenditure £0.025m – this in particular considers the cleaning services which SLLC pay for dual operated sites with SLC.
- **Programming:** Proposals to reduce the ACE programme under recovery £0.047m – the proposed expanding the children's activity programming with libraries on a pay as you go basis.
- **Essential spend measures:** Implementing essential spend procedures (£TBC) - The aim of reducing expenditure to that deemed critical by leadership team members in preserving the generation of income. It should be noted that has the potential impact on service provision and site appearance but this look to be minimised wherever possible.

The total of £0.516m mitigations identified so far, in conjunction to the expected general reserves balance of £0.347m, should provide the means to fund the early outturn overspend projections. It should be noted that these mitigations are subject to varying levels of uncertainty, and therefore a material financial risk remains.

5.4. As highlighting in the preceding sections, a number of financial variables remain fluid, and ongoing modelling work is being undertaken in conjunction with South Lanarkshire Council officers. As such the forecasts and mitigation assumptions contained within this report remain provisional. To provide appropriate levels of assurance and in line with normal timescales, a full outturn exercise is scheduled to be completed based on available financial information at the end of August. This will be reported to board in November to outline the projected outturn position for the financial year.

6. Utilities

6.1. At the last Board meeting, an update was provided on utilities. £0.365m, representing the underspend in utilities for 2025/26, was transferred from SLC to SLLC as part of the year end accounts process, as approved at SLCs Executive Committee on 24 June 2026. It is now anticipated that the same process will be completed as part of the year end accounts process for any underspend in utility costs in relation 2026/27.

6.2. In comparing the early projections for 2026/27 utilities, with the revised 2026/27 budget allocation of £4.017m following the implementation of Council Savings of £0.500m, the expected position is currently an overspend of (£0.035m). In this case, the resultant impact will be no additional contribution to SLLCs reserve position as was the case in previous years, thus reducing the ability to mitigate any overspends.

6.3. It will be for the Council's Executive Committee to agree if underspends in utilities in 2026/27 are returned to SLLC as was the case in 2025/26. Conversely, should the cost of utilities rise above the original allocation transferred to SLC, SLLC will be expected to transfer necessary levels of funding. The cost of 2026/27 utilities will continue to be monitored as the financial year progresses.

7. Next Steps

7.1. Continued monthly monitoring will be undertaken and in conjunction with budget holders across SLLC, the focus of which will be to continue to develop the outturn projection to ensure this is as accurate as possible. Staff will continue to liaise closely with SLC officers, with an update on projected year end position presented at the November 2026 SLLC Board meeting.

8. Employee Implications

8.1. There are no employee implications arising from this report.

9. Financial Implications

9.1. The financial implications are as detailed within this report.

10. Other Implications

10.1. There are no other implications in terms of risk and sustainability.

11. Equality Impact Assessment and Consultation Arrangements

11.1 There is no requirement to carry out an impact assessment or consultation in terms of the proposals contained within this report.

Ross McKie
Head of Corporate Services

2 September 2026

Links to SLLC Objectives

- Organisational Sustainability
- Health and Wellbeing
- Connected and Engaged
- Equality and Inclusion

Previous References

- 3 June 2026 SLLC Board Report: Revenue Budget 2026/27
- South Lanarkshire Council, Executive Committee, 24 June 2026 Report: Revenue Budget Year-End 2025/2026

List of Background Papers

- None

Contact for Further Information

If you would like to inspect the background papers, if any, or want further information, please contact:

Ross McKie, Head of Corporate Services
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Appendix 1

South Lanarkshire Leisure and Culture - 2026/27 June (Qtr. 1)
Current Financial Position Report (Variances greater than £50k highlighted)

Objective	Budget (m)	Phasing (m)	Actual (m)	Variance (m)	Comments
SPA	£2.585	(£0.313)	(£0.156)	(£0.157)	Income under recovered by (£249k) (Membership Income (£201k), Retail Sales/Vending (£49k)). Expenditure underspent by £92k (Underspends in employee costs £110k, Supplies/Services £47k, Off set overspends in Contractor Payments of (£40k)).
Libraries	£3.254	£0.609	£0.594	£0.015	Minor Variance.
Venues	£1.807	£0.182	£0.137	£0.044	Minor Variance.
Halls	£1.810	£0.191	£0.107	£0.083	Expenditure is underspent by £69k (Underspends in Employees £73k).
Museums	£0.504	£0.098	£0.089	£0.009	Minor Variance.
ACE	£0.012	(£0.070)	(£0.007)	(£0.063)	Income under recovered by (£52k) (Game on & Junior Memberships).
Outdoor	(£0.336)	(£0.480)	(£0.460)	(£0.020)	Minor Variance.
Support	£5.349	£0.867	£0.969	(£0.102)	Expenditure overspent by (£98k) (Overspend: IT (£164k) to cover concurrency, partially offset by underspends of £63k in utilisation of R&R fund).
Management Fee	(£14.985)	(£3.746)	(£3.746)	£0.000	
Total SLLC	£0.000	(£2.663)	(£2.473)	(£0.190)	

Subjective	Budget (m)	Phasing (m)	Actual (m)	Variance (m)	Comments
Employee Costs	£29.525	£5.368	£5.136	£0.232	Underspends in SPA £110k, Halls £73k and Outdoor £72k.
Property Costs	£3.053	£0.373	£0.383	(£0.010)	Minor Variance.
Supplies and Services	£3.480	£0.657	£0.763	(£0.107)	Overspends in Support of (£164k) off set by underspends in SPA £47k.
Transport Costs	£0.129	£0.044	£0.041	£0.003	Minor Variance.
Administration Costs	£1.594	£0.101	£0.111	(£0.010)	Minor Variance.
Payments to Other Bodies	£0.242	£0.155	£0.162	(£0.007)	Minor Variance.
Payments to Contractors	£0.693	£0.125	£0.139	(£0.014)	Minor Variance.
Financing Charges	£0.441	£0.082	£0.018	£0.064	Underspends in Support of £63k relating to planned used of R&R fund to support IT concurrency costs.
Gross Expenditure	£39.157	£6.904	£6.753	£0.151	
Income	(£24.172)	(£5.821)	(£5.480)	(£0.341)	Under recoveries of (£418k) relating to SPA (£250k), ACE (£52k) and Outdoor (£106k) off set by over-recoveries in Venues £52k..
Management Fee	(£14.985)	(£3.746)	(£3.746)	£0.000	
Net Expenditure	£0.000	(£2.663)	(£2.473)	(£0.190)	

South Lanarkshire
Leisure and Culture

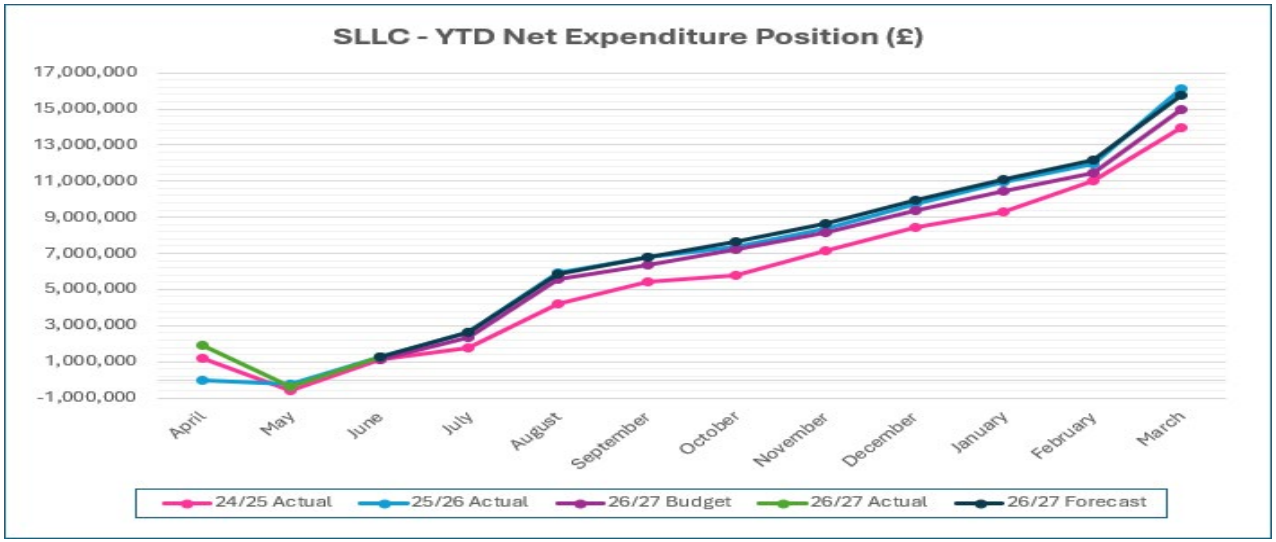
Quarterly Report

SOUTH LANARKSHIRE
Leisure & Culture

Quarter 1 - April to June 2026

Quarterly Report

Budgetary Position

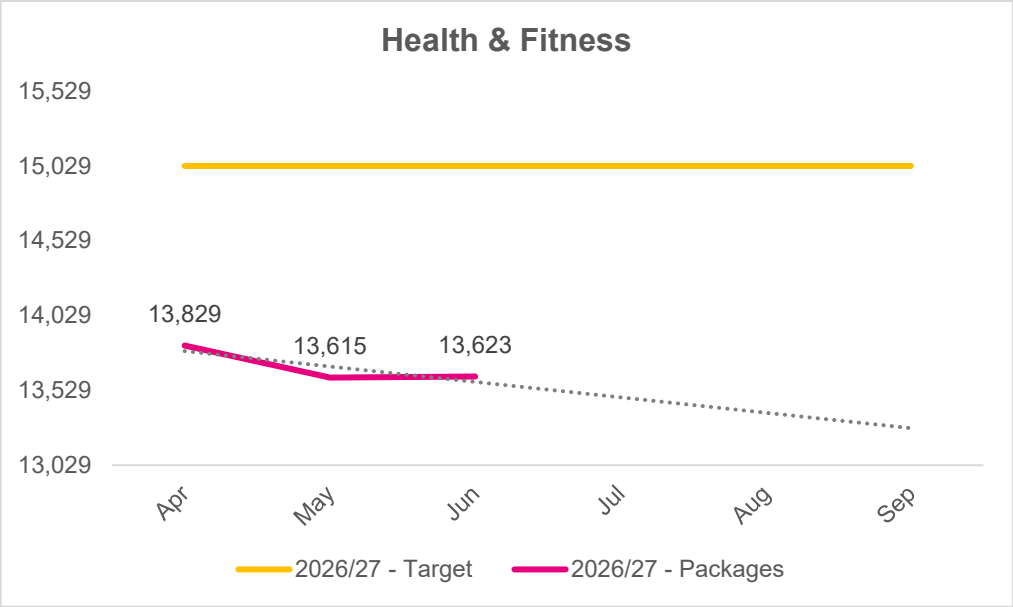


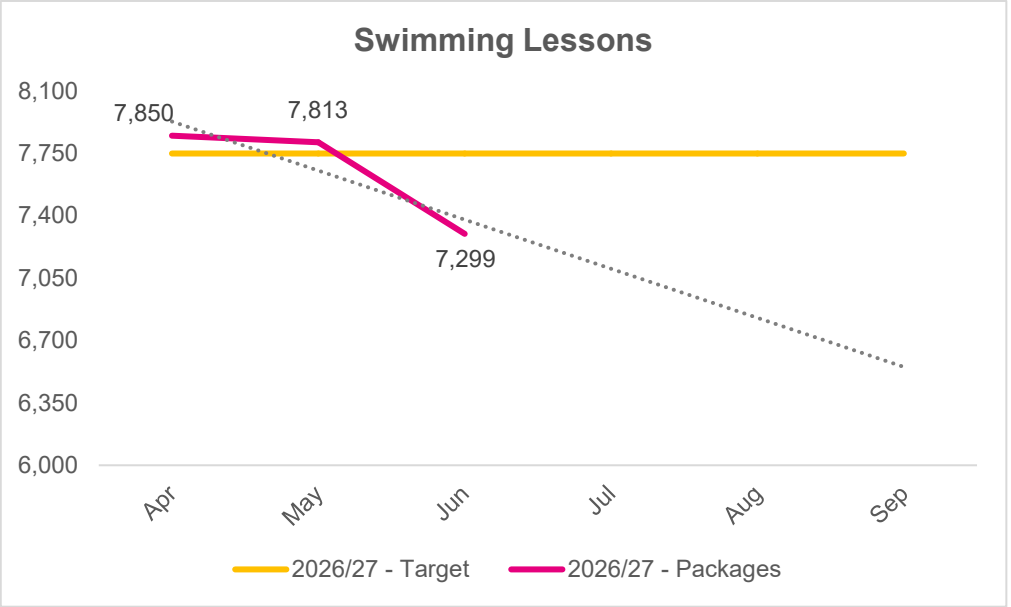
Year to Date	Budget (£K)	Actual (£K)	Variance (£K)	% +/-
Income	(9,567)	(9,226)	(341)	-3.56%
Expenditure	6,904	6,753	151	2.19%
Net Position	(2,663)	(2,473)	(190)	-7.13%

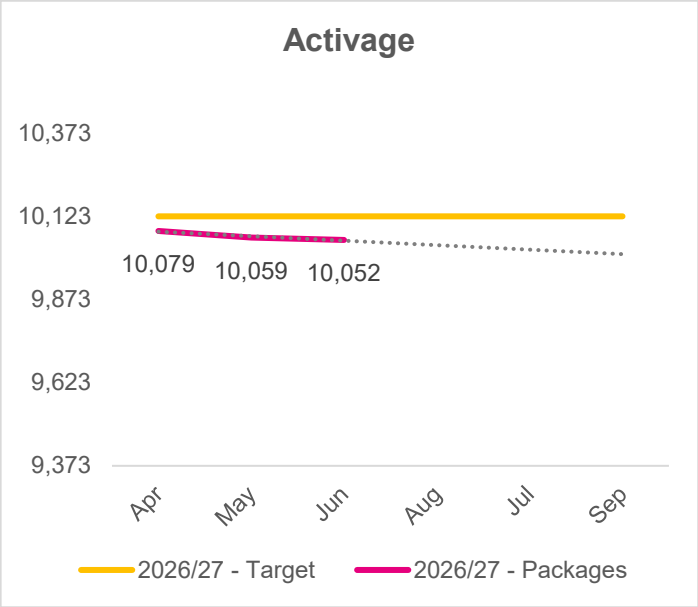
Notes

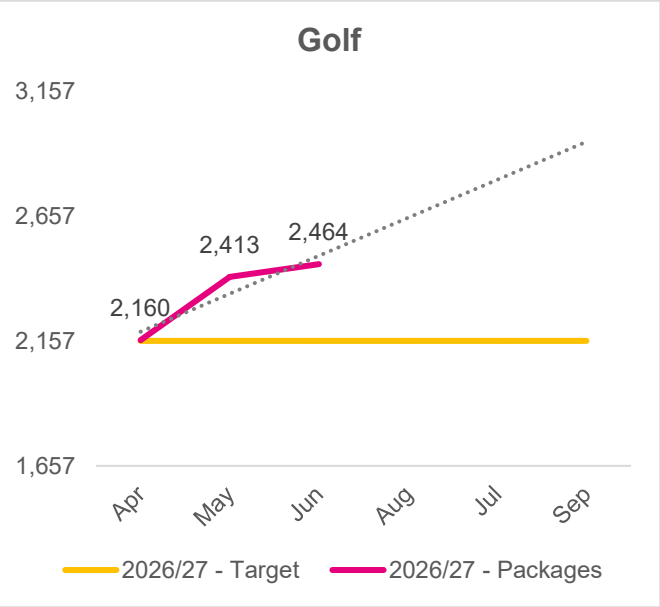
As at 30 June 2026, the SLLC budget has an overspend position of (£0.190m). This relates to an expenditure underspend of £0.151m. This primarily relates to underspends in staffing costs of £0.232m, in relation to SPA, Halls and Outdoors. Offset by overspends in supplies and services of (£0.107m), related overspends of (£0.164m) in IT systems costs and underspends of £0.047m in general supplies across SPA. Within financing charges, there is an underspend of £0.063m in relation to the R&R fund which is being used to support concurrency costs whilst SLLC transfers to its new front of house management system. Income overall is currently showing an under recovery of (£0.341m), which is mainly attributable to SPA and an under recovery of (£0.250m) primarily related to membership income. There are under recoveries in ACE of (£0.052m) due to membership and pay as you go income, and outdoor of (£0.106m) related to Calderglen and the realignment to take place for Golf in relation to the transfer of Hollandbush. These under recoveries have been partially offset by over recoveries in income related to Venues of £0.052m for hires and bar income.

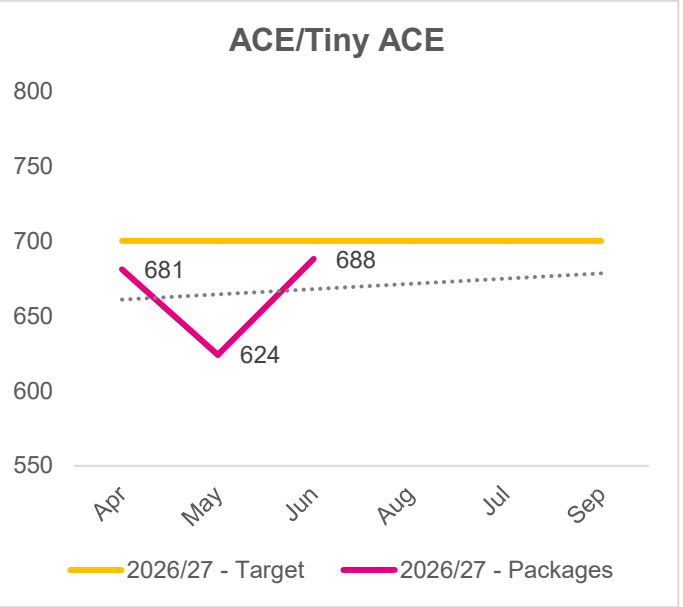
Membership Packages - Quarterly Review Against Target



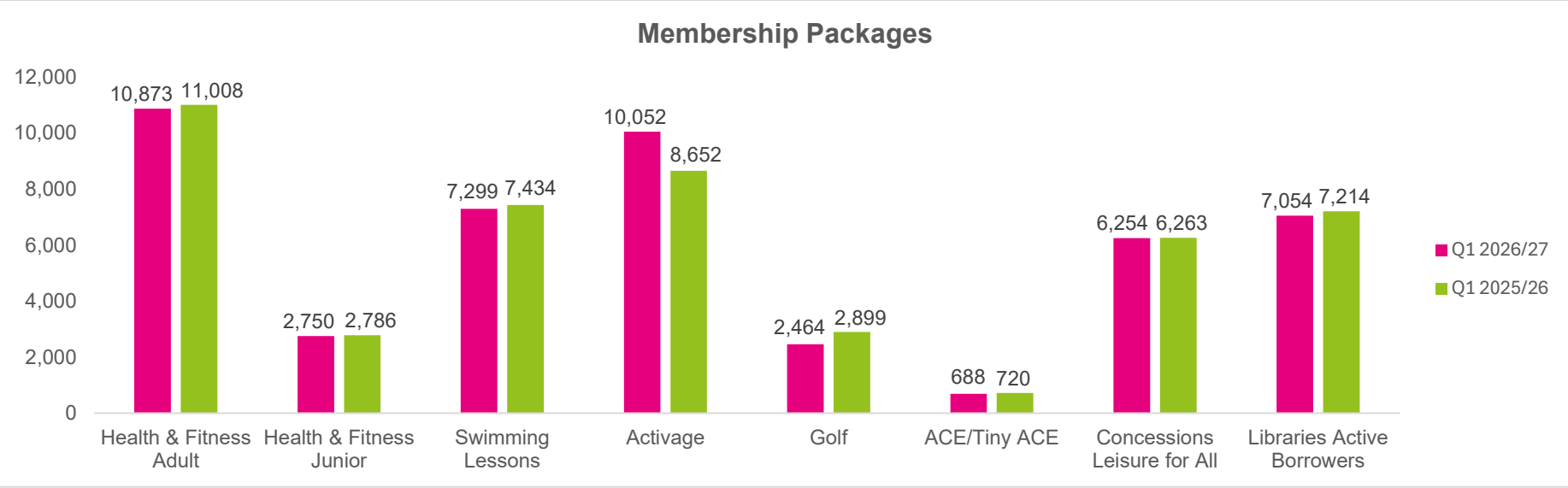








Memberships



	Q1	Q1	Year on Year
Memberships	**2026/27**	**2025/26**	**% RAG Shift**
Health & Fitness - Adult	10,873	11,008	-1.2%
Health & Fitness - Junior	2,750	2,786	-1.3%
Swimming Lessons	7,299	7,434	-1.8%
Activage	10,052	8,652	16.2%
Golf	2,464	2,899	-15.0%
ACE/Tiny ACE	688	720	-4.4%

Memberships

Memberships	Q1 2026/27	Q1 2025/26	Year on Year % RAG Shift
Concessions - Leisure for All	6,254	6,263	-0.1%
Libraries - Members	158,144	151,030	4.7%
Libraries - Active Borrowers	7,054	7,214	-2.2%

Notes and Analysis

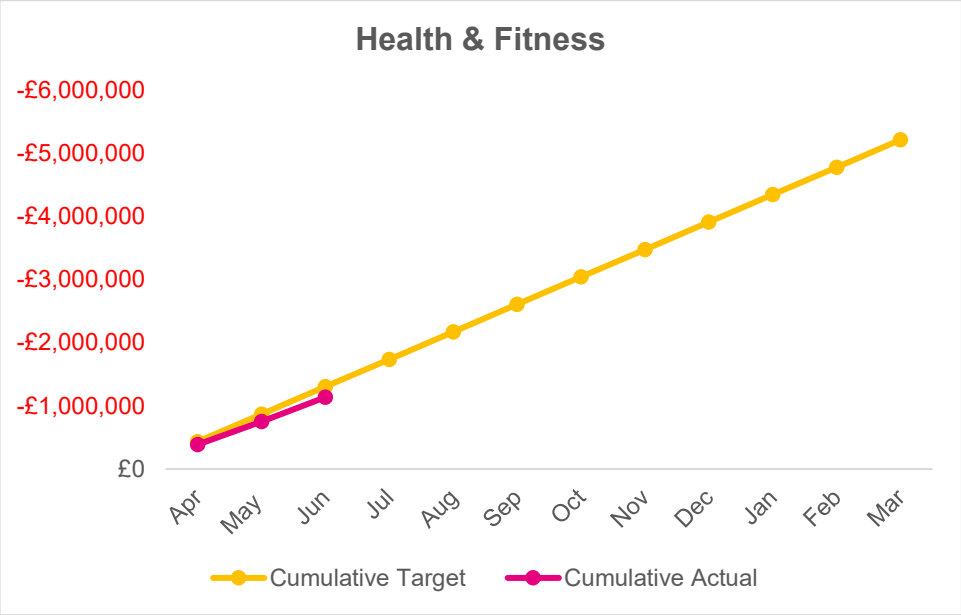
Membership Packages: The figures represent active memberships as of the end of June 2026, including those with cancellation requests. Memberships remain valid until the final payment is processed, therefore cancellation requested towards the end of the reporting period may still be reflected in the figures.

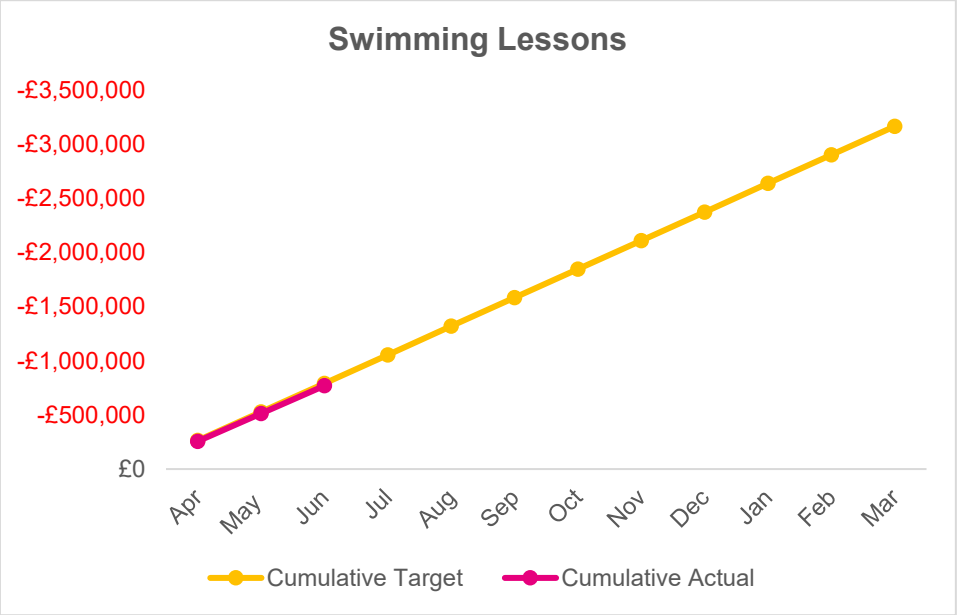
Quarter 1 performance presents a mixed picture with Adult Health & Fitness, Junior Health & Fitness, Swimming Lessons and ACE membership packages showing a slight decline compared with the same period last year. Activage memberships have however, increased by over 16% compared to Quarter 1 last year.

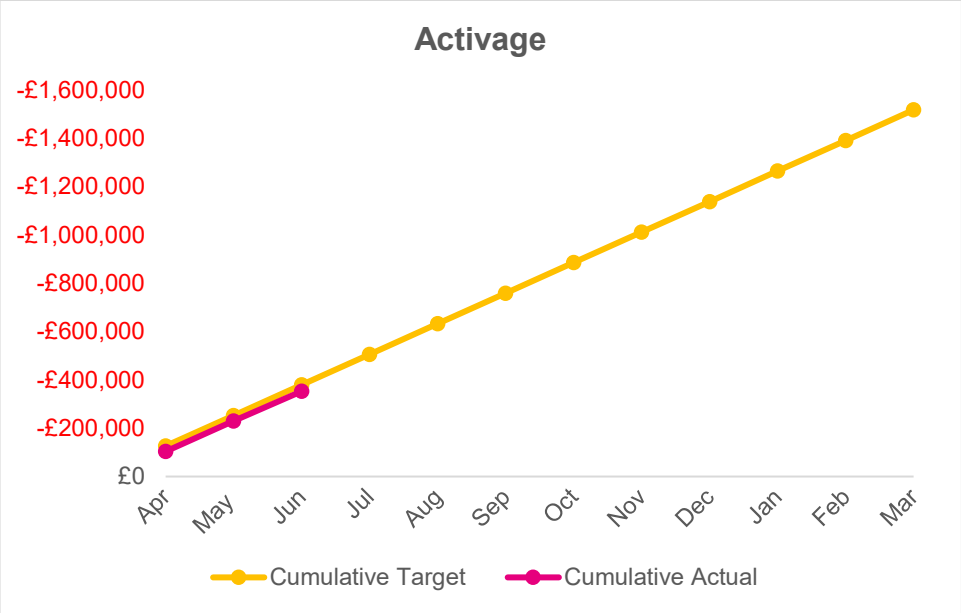
As displayed on Page 3 of this report 'Membership Packages - Quarterly Review Against Target', new leisure membership targets have been set for 2026 with progress against target being regularly monitored.

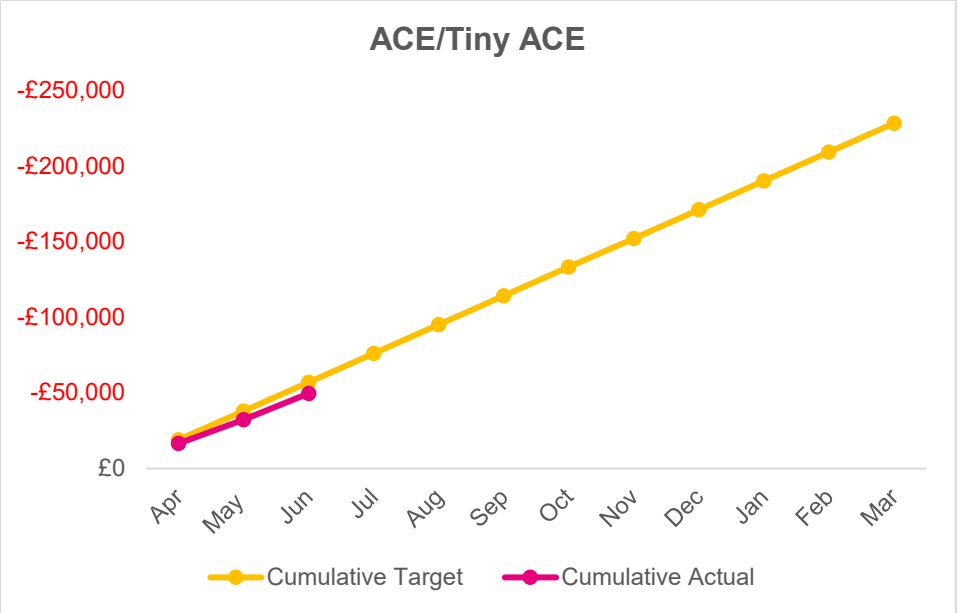
Libraries: Library membership continues to grow, with 4.7% more people joining our libraries compared to the same period last year. In contrast, the number of active borrowers has seen a marginal decrease of 2.2%. While this decline is relatively low, it suggests that more people are engaging with library services for a wider range of purposes beyond borrowing, such as digital access, events and community activities.

Membership Income v Membership Income Target

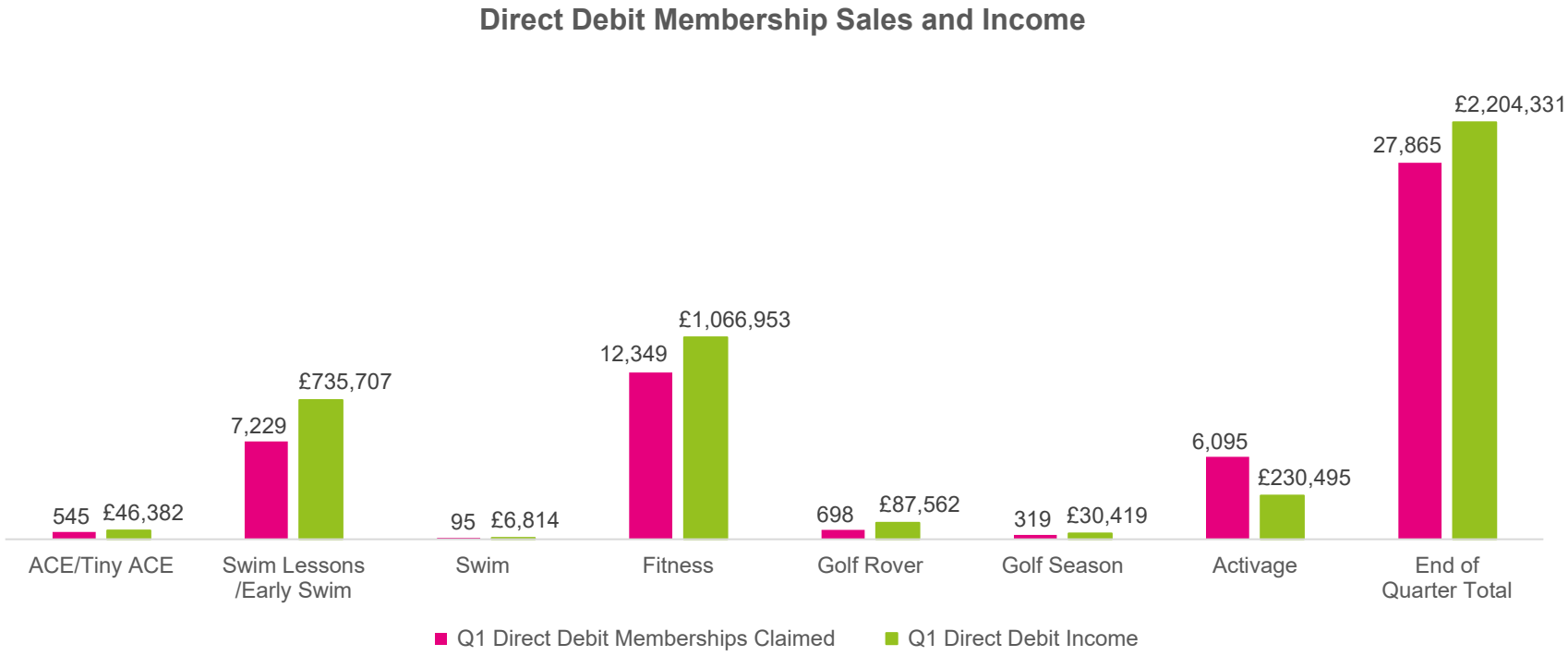








Direct Debit Membership Sales and Income



Notes and Analysis

The chart above illustrates the average number of membership packages claimed via direct debit between April and June 2026, alongside the direct debit revenue generated by each package type during the Quarter.

Quarter 1 closed with 27,865 membership packages claimed via direct debit with a total amount claimed of £2,204,331.

Spotlight On - Impact of Gym/Studio Refurbishment Works

	Current Period	Year on Year	
Memberships	**Q1 2026**	**Q1 2025**	**RAG Shift**
Strathaven Leisure Centre (Re-opened August 2025)			
Total Health & Fitness Membership Packages at end of Quarter	1,026	910	12.7%
Total Activage Membership Packages at end of Quarter	640	527	21.4%
Total Gym Attendances for Quarter	7,750	6,004	29.1%
Total Fitness Class Attendances for Quarter	6,933	5,846	18.6%
Biggar Sports Centre (Re-opened August 2025)			
Total Health & Fitness Membership Packages at end of Quarter	129	100	29.0%
Total Activage Membership Packages at end of Quarter	53	37	43.2%
Total Gym Attendances for Quarter	1,117	736	51.8%
Total Fitness Class Attendances for Quarter	1,157	560	106.6%
John Wright Sports Centre (Re-opened November 2025)			
Total Health & Fitness Membership Packages at end of Quarter	982	938	4.7%
Total Activage Membership Packages at end of Quarter	1,027	873	17.6%
Total Gym Attendances for Quarter	11,757	11,195	5.0%
Total Fitness Class Attendances for Quarter	24,336	20,722	17.4%
Carluke Leisure Centre (Re-opened November 2025)			
Total Health & Fitness Membership Packages at end of Quarter	1,284	1,181	8.7%
Total Activage Membership Packages at end of Quarter	664	607	9.4%
Total Gym Attendances for Quarter	11,010	9,634	14.3%
Total Fitness Class Attendances for Quarter	13,768	13,739	0.2%

Spotlight On - Impact of Gym/Studio Refurbishment Works

	Current Period	Year on Year	
Memberships	**Q1 2026**	**Q1 2025**	**RAG Shift**
Blantyre Leisure Centre (Re-opened January 2026)			
Total Health & Fitness Membership Packages at end of Quarter	1,710	1,815	-5.8%
Total Activage Membership Packages at end of Quarter	866	794	9.1%
Total Gym Attendances for Quarter	14,123	19,309	-26.9%
Total Fitness Class Attendances for Quarter	11,345	9,299	22.0%
Hamilton Water Palace (Re-opened January 2026)			
Total Health & Fitness Membership Packages at end of Quarter	1,047	1,042	0.5%
Total Activage Membership Packages at end of Quarter	733	651	12.6%
Total Gym Attendances for Quarter	10,447	7,548	38.4%
Total Fitness Class Attendances for Quarter	7,161	6,461	10.8%
Lanark Lifestyles (Re-opened January 2026)			
Total Health & Fitness Membership Packages at end of Quarter	1,082	1,082	0.0%
Total Activage Membership Packages at end of Quarter	761	692	10.0%
Total Gym Attendances for Quarter	9,723	8,419	15.5%
Total Fitness Class Attendances for Quarter	14,935	15,036	-0.7%
Eastfield Lifestyles (Re-opened February 2026)			
Total Health & Fitness Membership Packages at end of Quarter	1,785	1,920	-7.0%
Total Activage Membership Packages at end of Quarter	1,372	1,251	9.7%
Total Gym Attendances for Quarter	19,616	20,196	-2.9%
Total Fitness Class Attendances for Quarter	11,234	11,120	1.0%

Spotlight On - Impact of Gym/Studio Refurbishment Works

	Current Period	Year on Year	
Memberships	**Q1 2026**	**Q1 2025**	**RAG Shift**
Blackwood & Kirkmuirhill Community Wing (Re-opened February 2026)			
Total Health & Fitness Membership Packages at end of Quarter	265	264	0.4%
Total Activage Membership Packages at end of Quarter	115	101	13.9%
Total Gym Attendances for Quarter	3,420	2,735	25.0%
Total Fitness Class Attendances for Quarter	3,912	3,348	16.8%
Dollan Aqua Centre (Re-opened March 2026)			
Total Health & Fitness Membership Packages at end of Quarter	1,261	1,275	-1.1%
Total Activage Membership Packages at end of Quarter	1,374	1,271	8.1%
Total Gym Attendances for Quarter	14,305	11,429	25.2%
Total Fitness Class Attendances for Quarter	14,625	14,216	2.9%
Willie Waddell Sports and Community Centre (Re-opened March 2026)			
Total Health & Fitness Membership Packages at end of Quarter	125	126	-0.8%
Total Activage Membership Packages at end of Quarter	61	52	17.3%
Total Gym Attendances for Quarter	1,649	1,248	32.1%
Total Fitness Class Attendances for Quarter	1,484	1,131	31.2%
Coalburn Leisure Complex (Re-opened April 2026)			
Total Health & Fitness Membership Packages at end of Quarter	310	331	-6.3%
Total Activage Membership Packages at end of Quarter	198	180	10.0%
Total Gym Attendances for Quarter	4,595	1,427	222.0%
Total Fitness Class Attendances for Quarter	1,592	1,346	18.3%

Spotlight On - Free Swimming for Under 16s

Memberships	Current Period Q1 2026	Year on Year Q1 2025	RAG Growth
All Pools			
Total Under 16 Attendances	17,548	17,644	-0.5%
Total Attendances by Non Swimming Lesson Members	16,096	14,107	14.1%
Blantyre Leisure Centre			
Under 16 Attendances	2,742	4,191	-34.6%
Attendances by Non Swimming Lesson Members	2,109	2,569	-17.9%
Carluke Leisure Centre			
Under 16 Attendances	1,079	935	15.4%
Attendances by Non Swimming Lesson Members	1,054	792	33.1%
Coalburn Leisure Complex			
Under 16 Attendances	1,679	1,105	51.9%
Attendances by Non Swimming Lesson Members	1,356	813	66.8%
Dollan Aqua Centre			
Under 16 Attendances	3,231	2,003	61.3%
Attendances by Non Swimming Lesson Members	3,161	1,731	82.6%
Eastfield Lifestyle			
Under 16 Attendances	1,109	1,223	-9.3%
Attendances by Non Swimming Lesson Members	1,073	967	11.0%
Hamilton Water Palace			
Under 16 Attendances	1,993	3,384	-41.1%
Attendances by Non Swimming Lesson Members	1,959	3,222	-39.2%
Lanark Lifestyles			
Under 16 Attendances	1,552	1,521	2.0%
Attendances by Non Swimming Lesson Members	1,395	1,152	21.1%
Larkhall Leisure Centre			
Under 16 Attendances	1,488	1,210	23.0%
Attendances by Non Swimming Lesson Members	1,427	1,051	35.8%
Strathaven Leisure Centre			
Under 16 Attendances	2,675	2,072	29.1%
Attendances by Non Swimming Lesson Members	2,562	1,810	41.5%

Emerging Challenges

The following challenges remain:

- General inflation has increased slightly, uncertainty remains due to other potential cost increases
- Continuing pressures of cost of living and the ability for the public to spend available income on leisure and cultural services
- The employment market remains competitive with the ability to fill vacant posts creating pressure on operations
- Managing the impact of the pay award and future changes to employer pension contributions
- Some older facilities require investment in order to bring up to modern standards or to halt any further deterioration. SInce July 2025, Gym/studio upgrades and equipment refurbishments have been underway at multiple sites with works nearing completion

Service Disruption

Location	Description	Time Period	Estimated YTD Financial Impact & (Additional Cost of Lost Income)	Comments
Larkhall Leisure Centre	Closure of main hall due to issues with flooring	September 2023 to Present	£12,000 income loss for Q1 2026/27	New design plans have been finalised for the new centre, which has a targeted completion date of Summer 2028
Gym/Studio Upgrade Programme	New equipment installation and upgrade works. Work due for completion at Fairhill Lifestyles at the end of June 2026 Remaining gyms where work has still to be confirmed are Jock Stein, Fernhill & Larkhall	This upgrade programme has been underway since July 2025	Estimates of income loss range from £1,000 to £3,000, depending on size of facility	The overall upgrade/modernisation programme is almost complete. Fairhill Lifestyles due to be reopened at the beginning of July 2026

Service Disruption

Location	Description	Time Period	Estimated YTD Financial Impact & (Additional Cost of Lost Income)	Comments
Eastfield Lifestyles	Pool is due to be closed for one month	From 13 July 2026	TBC in Q2	
Blantyre Leisure Centre	Health Suite is due to close for improvement work	Date TBC	TBC in Q2	
Eddlewood	NHS have intimated their possible withdrawal from the site which is used as a Vaccination Centre	Date TBC	TBC in Q2	Current recharge for Q1 was £50,000

Notes and Analysis

Disruption continued during Q1 as major refurbishment works and equipment refits neared completion across gym and studio areas, supported by £2.74m of Transformation Fund investment from South Lanarkshire Council. This programme is designed to ensure affordable access to modern fitness facilities equipped with state of the art equipment.

Capital Projects

The Council has appointed a consultant to undertake an independent objective review of Council properties, including those operated by SLLC. This Estates Review is being led by Housing and Technical Resources and interim updates were reported to the Executive Committee in March and June. The outcomes from the review and the proposed 10 Year Estate Strategy, are currently being finalised for presentation to Committee.

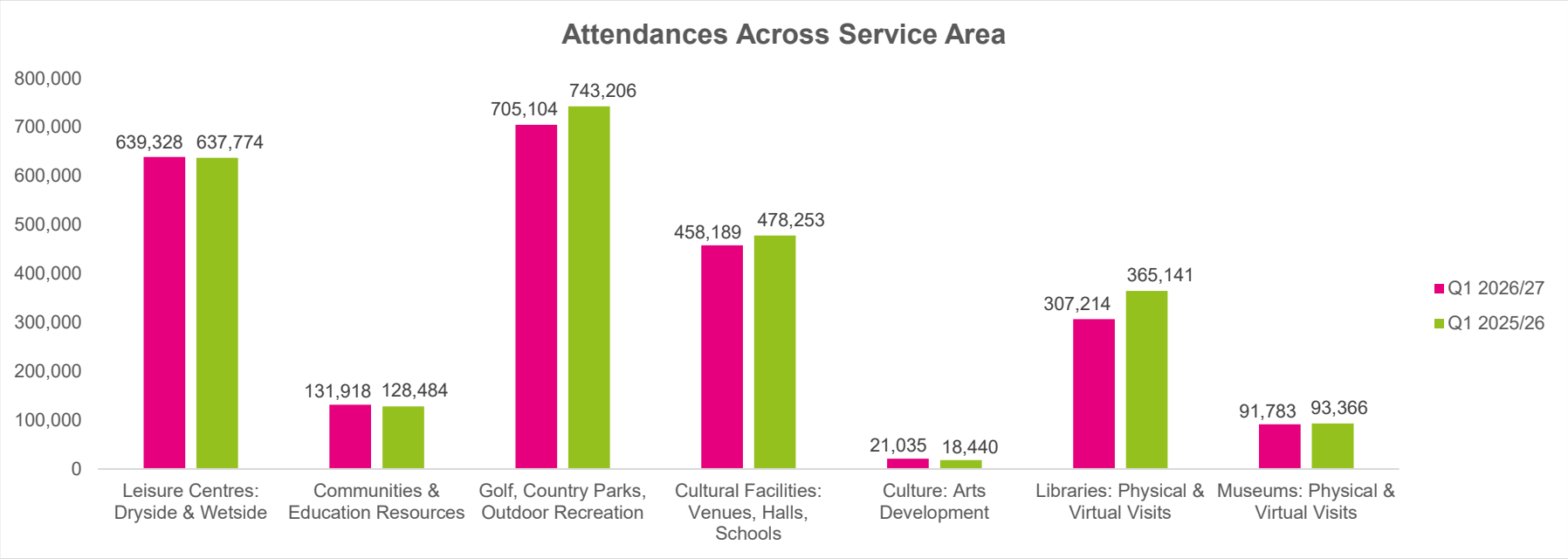
The £13m Transformation Fund helping to modernise the leisure and culture estate is almost complete. Further to upgrades completed in 2025/26, to sports centres and swimming pools, upgrades to various football pitch changing accommodation, Country Parks, Fairhill gym extension and air conditioning project are now also complete. The remaining Transformation Fund projects are underway to refurbish Hamilton Town House, Rutherglen Town Hall and Lanark Memorial Hall. Phase 1 electronic access controls in sports centres are almost complete with a roll out programme scheduled over the next few months and Phase 2 is underway to install electronic access in various community facilities. Design to replace the 11 a side pitch at Hamilton Palace Sports Grounds is underway and work should complete this financial year.

Planning permission was approved for the new Larkhall Leisure Centre in September 2025 and the detailed design stages have been completed. A programme of enabling works commenced on site in early May 2026 and final legal discussions are ongoing to allow the main works contract to be signed imminently, with a site start anticipated in early September 2026 and conclusion in Summer 2028. The approval by Glasgow City Region of a £3m contribution means that all funding for the project has now been approved and is in place. Adaptation works within Larkhall Academy were completed in February 2026 allowing the campus to be operated as a dual use facility, an arrangement that will continue until the new centre is completed. Completion of the new facility is programmed for summer 2028.

Clydesdale Way paths project forms part of the 'Three Rivers Active Tourism Project' linking Dumfries and Galloway and Scottish Borders Councils and will address key gaps in the regional paths network in South Lanarkshire. A joint award of £22,809,416 was received from Levelling Up Fund (LUF). Consultants Turner and Townsend and Stantec have been appointed to design and manage the Clydesdale Way project. The project is progressing well, engagement with landowners is underway, community and stakeholder engagement sessions have completed, with wider online and in person consultation completed in Spring 2026. The consultant has completed RIBA stage 3 report and is working on RIBA Stage 4. Opportunities for upgrade to local parks and infrastructure may also be explored. The project is schedule to complete by 2028 in line with LUF grant conditions.

Following development of the Masterplans, the Council has allocated significant investment to progress a number of priority projects. This includes £1.2m to upgrade the Calderglen Play Park and £5.6m to deliver a new car park at Colonsay Fields and an active travel route into the park. Design work for both projects is underway, with construction anticipated to commence in 2027/28. The new pump track is also being progressed at Calderglen, with construction currently anticipated to commence August 2026, subject to finalisation of access, health and safety and construction arrangements. Condition surveys of the path networks across both parks have now been completed and are being used to inform the development of costed investment proposals and priorities for improvements across both path networks. In addition, the Executive Committee agreed on 24 June 2026 to reallocate the funding previously identified for the White Bridge at Chatelherault towards improvements to path infrastructure and signage in the vicinity of the bridge. Draft Woodland Management Plans have also been received for both parks, and arrangements for public consultation are currently being finalised.

Attendances



	Q1	Q1	Year on Year
Attendances	**2026/27**	**2025/26**	**% RAG Shift**
Leisure Centres - Dryside & Wetside	639,328	637,774	0.2%
Communities & Education Resources	131,918	128,484	2.7%
Golf, Country Parks, Outdoor Recreation	705,104	743,206	-5.1%
Cultural Facilities - Venues, Halls, Schools	458,189	478,253	-4.2%
Culture - Arts Development	21,035	18,440	14.1%
Libraries - Physical & Virtual Visits	307,214	365,141	-15.9%
Museums - Physical & Virtual Visits	91,783	93,366	-1.7%

Attendances

Notes and Analysis

Facility Closures/Disruption:

- Facilities closed for Easter and May public holidays
- Two temporary pool closures at Hamilton Water Palace and Lanark Lifestyles as per protocol due to AFR incidents
- Ongoing closure of main hall at Larkhall Leisure Centre due to issues with flooring

Gym/Studio Refurbishment Works:

- Works ongoing at Fairhill Lifestyles
- Coalburn Leisure reopened during April 2026

Leisure Centres: Facilities reported variable attendances across the Quarter influenced by seasonal factors and facility upgrades. Notable increases of gym and fitness class attendances have been recorded across sites post gym and studio upgrade works. Free swimming for under 16s in partnership with the Council since April 2026, has also seen additional attendances across our pool sites.

Golf, Country Parks, Outdoor Recreation: Golf attendances have dropped for this Quarter attributed to the community asset transfer last year of Hollandbush. Car counters installed at both country parks in April 2025, have improved tracking of vehicle based attendances, resulting in a year on year variation.

Libraries: Overall, combined physical and virtual visits have dropped compared with the same period last year. This pattern is replicated when broken down individually also. The integrated library at Blantyre continues to attract exceptional visitor numbers, recording a 103.4% increase compared to the same period last year (8,791 in Quarter 1 2026/27 compared with 4,312 in Quarter 1 2025/26).

Museums: Overall, combined physical and virtual visits were lower than during the same period last year, primarily due to a reduction in virtual visitors accessing both the Cameronian and SLLC websites. Despite this overall decline, Low Parks Museum recorded a slight increase in physical visitor numbers compared with 2025/26, while visitor numbers at the Mausoleum remained consistent with the previous year.

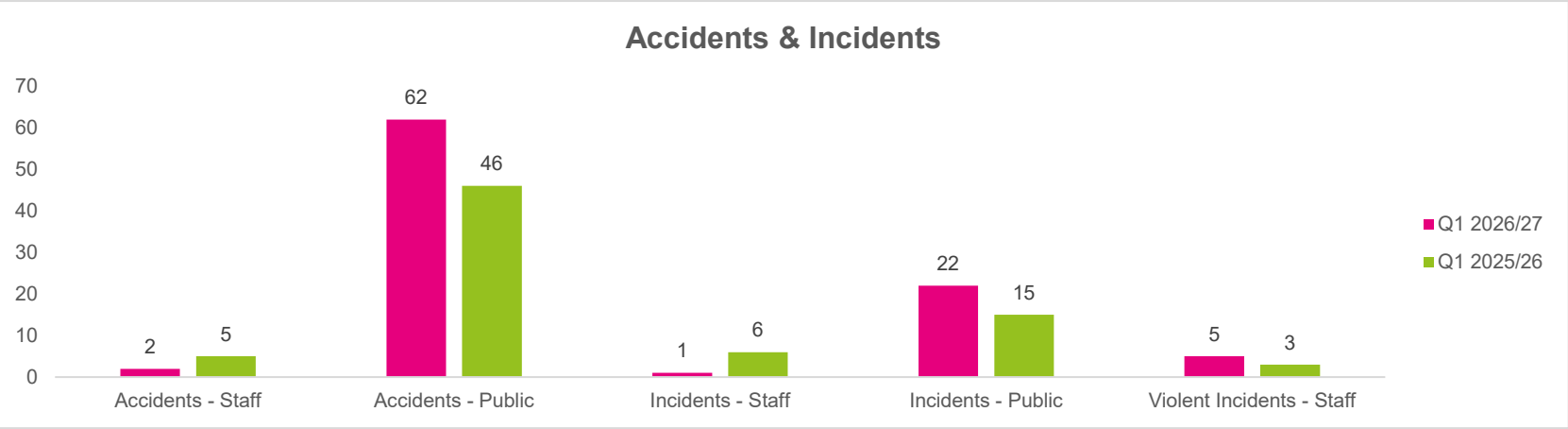
Staffing

Establishment Position (30 June 2026) FTE - Full Time Equivalent calculated on 35 and 37 hour basis. Excludes funded posts				
Area	**Establishment Variance FTE**	**Establishment Variance %**	**Current Recruitment FTE**	**Comments**
Halls	7.90	13.37%	0.92	Under due to staffing mix - casual/overtime provision
Libraries	-2.43	-3.25%	1.70	Over at present due to reprovisioned services
Museums	0.07	0.63%	0.00	No active recruitment
Outdoor	16.63	20.26%	1.17	Under due to staffing mix - casual/overtime provision
Leisure Centres	32.88	12.02%	16.79	Under due to staffing mix - casual/overtime provision
Support	-0.41	-0.54%	1.60	BA post being recruited, temp over due to clerical posts for IT (funded)
Venues	-0.58	-0.89%	3.80	Over due to supervisor posts
Grand Total	**54.06**	**8.43%**	**25.98**	

Notes and Analysis

Recruitment activity continues across all service areas. However, the employment market remains highly competitive, and ongoing difficulties in filling vacant posts are placing increased pressure on service delivery. In addition, most posts are currently being advertised on a fixed term basis until March 2027, which presents further challenges in attracting and retaining staff.

Health & Safety



Health & Safety	Q1 2026/27	Q1 2025/26	Year on Year RAG Shift
Accidents - Staff	2	5	✓
Accidents - Public	62	46	✗
Incidents - Staff	1	6	✓
Incidents - Public	22	15	✗
Violent Incidents - Staff	5	3	✗

Notes and Analysis

Staff accidents fell by three compared to the same period last year, one major and one minor. The major accident required hospital treatment and was RIDDOR reportable. Public accidents rose by 16, with eight major accidents requiring hospital treatment and a further 54 minor cases treated on site with first aid. Staff incidents fell by five, whilst public incidents rose by seven, including one major involving the police at Calderglen Country Park and four reports of disorderly customer behaviour. Staff violent incidents rose by two, three instances occurring at library sites and two at hall sites.

Delivering Strategic Objectives - Year 5 2026/27

Health and Wellbeing We will help the people of South Lanarkshire to live healthier, happier lives with a focus on physical and mental wellbeing			
Priority 1 (HWB1)	**Priority 2 (HWB2)**	**Priority 3 (HWB3)**	**Priority 4 (HWB4)**
Participate in a whole system approach to health and wellbeing along with our partners including the NHS, the Health and Social Care Partnership and others, to improve health and wellbeing for individuals and communities within South Lanarkshire.	**Encourage and support the inactive to be active** with focus on positive physical health and wellbeing outcomes.	**Support positive mental health** and deliver on health and wellbeing outcomes.	**Provide early intervention and prevention initiatives** to address health and wellbeing matters at their root cause.

Health and Wellbeing Successes

Clydesdale Libraries Positive Affirmation Cards: This wellbeing initiative was funded by Pettinain Community Council and developed in partnership with local yoga teacher. Designed with primary school children in mind, the Positive Affirmation Cards encourage mindfulness, self belief and emotional wellbeing. The project has already been successfully introduced in several Clydesdale primary schools, where teachers use the cards to support classroom activities that help build pupils' confidence, resilience and self esteem. The cards offer a simple yet powerful way to promote positive thinking, emotional wellbeing and meaningful engagement within library settings.

Canberra Project: This is a new collaborative programme in conjunction with various services across the Community and Education Team including active schools, outdoor learning and adventure, libraries and museums. A programme was developed that provided a variety of opportunities for primary aged children towards the end of the school day and immediately after school. In total, 100 children attended, 60 for the after school element.

Davie Cooper Festival: This event was run by Club Sport Hamilton at Hamilton Palace Sports Grounds with over 40 teams taking part. The boys competition was won by Woodside Primary with Townhill Primary as runners up and the Girls Competition was won by Glengowan Primary with Woodside Primary as runners up.

Delivering Strategic Objectives - Year 5 2026/27

Health and Wellbeing

We will help the people of South Lanarkshire to live healthier, happier lives with a focus on physical and mental wellbeing

Health and Wellbeing Successes

Culture Strategy: Work on this project is well underway with a dedicated Project Board established to provide strategic oversight. In addition, three workstreams have been created to drive delivery across key areas of activity and, a Development Officer has been recruited to lead on critical strands of the project and support the successful development and implementation of the Strategy. The investment of £800,000 from the Council to deliver on this work will help strengthen cultural participation, support local communities, and enhance the area's cultural offer.

Blantyre Celtic YFC Easter Camp: High quality, inclusive holiday provision for over 150 children and young people was successfully delivery over six days at Hamilton Palace Sports Ground. The central focus of the programme was addressing holiday hunger and promoting wellbeing. The camp provided a structured and engaging environment keeping participants active, supported and connected throughout the Easter Holidays.

National League American Football 5 v 5 Tournament: Hamilton Palace Sports Grounds hosted the British American Football Association (BAFA) National Leagues U16 fixture for the Scotland conference. Four teams of participants aged 13 - 16 took part in full contact American Football while playing a small sided format of 5 v 5. Teams were playing for qualification to the regional playoffs (Scotland, North and Midlands conferences) to be held in the north of England, and then onward qualification to the National U16 Britbowl final in Stafford in August for either the championship or plate categories.

Primary Schools Girls Football: The School Sport South Lanarkshire (SSSL) Girls Football Festival was successfully hosted at Hamilton Palace Sports Grounds in June. The festival brought together 360 players from schools across South Lanarkshire, providing a valuable opportunity for girls to engage in sport, develop their skills and enjoy positive experiences through football. The event was a great success and highlighted the continued growth, popularity, and strength of girls football within the region.

Delivering Strategic Objectives - Year 5 2026/27

Connected and Engaged We will enable people to connect with each other and with their community through the services we provide			
Priority 1 (CE1)	**Priority 2 (CE2)**	**Priority 3 (CE3)**	**Priority 4 (CE4)**
Reach out to people where they are, by providing services to all communities across South Lanarkshire.	**Support communities to develop and build their capacity** and, where appropriate, explore options for asset transfer of our resources.	**Develop alternative delivery methods** and grow our digital offerings such as online classes and access to e-books.	**Help tackle isolation** by providing initiatives that bring people together.

Connected and Engaged Successes

Libraries: A number of events were delivered at Hamilton Town House library that encouraged active participation, reduced isolation and built social connections. Positive feedback was received from attendees at a Mindfulness talk and a new Knit and Natter group attracted a diverse range of participants in a welcoming social space. As part of Young at Heart Week, a local author gave a talk at Fairhill Library providing attendees with the opportunity to engage with local literature and participate in discussion with the author. At Blantyre Library, a new Lego v Minecraft group was launched for children aged 5 - 11 providing a fun and creative space for children to come together to build, create and share ideas. Events were also hosted in partnership with Rutherglen Library and Rutherglen Town Hall for Comic Con which proved highly successful in attracting new and diverse audiences.

Lending Voices Podcast Project: Officially launched at Rutherglen Library, this project contributed to the celebrations of Rutherglen's 900th anniversary by working in partnership with ten local primary schools to create a series of ten podcasts exploring the town's rich history and heritage.

Calderglen Zoo: In the build up to the end of term, the ever popular animal experiences sessions resumed for visiting primary classes. These sessions enable pupils to meet some of the Zoo's residents up close and personal in a controlled environment. 23 sessions were run across 15 different schools.

Bothwell Futures and Seniors Together: Services, programmes and events were showcased at a networking event held in the Bothwell Hub. One of the newly appointed 'Aging Well Ambassadors' was in attendance to help build links with key partners and raise awareness of our services with local residents and members.

Delivering Strategic Objectives - Year 5 2026/27

Connected and Engaged

We will enable people to connect with each other and with their community through the services we provide

Connected and Engaged Successes

Area Committee Presentations: Performance reporting within the SLC Commissioning Plan includes presentations to the four Area Committees. These presentations took place in June and provided an opportunity for SLLC to demonstrate how the SCIO supports the Council in delivering its key priorities and outcomes, while also highlighting significant achievements, challenges and areas of focus within each locality. Presentations lasted approximately 10 - 15 minutes and were delivered with support from members of both the SLLC Leadership Team and Extended Management Team. Overall, the presentations were well received, and feedback suggests they worked well as an effective means of sharing information and increasing awareness among local Elected Members about the breadth and impact of SLLC's work.

Employee Recognition: Our refreshed Employee Recognition Scheme was launched in April and the first Quarter has seen more than 100 employees nominated by both colleagues and customers. This strong level of engagement represents a highly encouraging start and reflects the positive impact staff are making across the organisation. The nominations highlight how employees are demonstrating SLLC's values in their day to day work, contributing to a positive working environment for colleagues and delivering excellent experiences for those who access our services. Employees who have been nominated, along with the overall Quarter 1 winner, will be recognised by the Chief Executive. Their achievements will also be celebrated through a range of internal and external communication channels, including the SLLC website and staff newsletter, helping to showcase and promote the outstanding contributions being made across the organisation.

SLLC Website: Signficant progress has been made on the planning phase of the new website including staff questionnaires, customer journey mapping, website analytics review and developing an initial architecture for the new site.

Staff Bulletin: The second edition of the newsletter has been exceptionally well received with positive feedback from across the organisation. Input from all services has made this edition informative, engaging and a true reflection of the excellent work happening across the organisation.

Delivering Strategic Objectives - Year 5 2026/27

Equality & Inclusion We will provide accessible wellbeing and learning services through targeted interventions			
Priority 1 (EI1)	**Priority 2 (EI2)**	**Priority 3 (EI3)**	**Priority 4 (EI4)**
Ensure equality of opportunity by making sure that our services are accessible to all.	**Target our programmes and interventions** to ensure we reach those most in need of our services.	**Enable access to learning and information** across our communities and support community learning.	**Provide welcoming inviting spaces** where customers receive a warm reception.

Equality and Inclusion Successes

Look for a Book in Lanark: In partnership with Community Learning, 20 children and 10 parents met at Morrisons, Lanark and followed a book trail to Lanark Library, where they collected their Book Detective badges. The library hosted a dinosaur themed craft session with stories and snacks. This inclusive event supported local low income and ethnic minory background families by providing free summer library activities and community learning also reached out to two parents who were interested in attending ESOL classes.

Sensory Storytime at Stanmore School: Children's Assistants in Clydesdale ran a fun and engaging inclusive storytime session for children with complex additional support needs at Stanmore Residential School in Lanark. The storytime theme was colours of the rainbow with sensory bags containing objects such as feathers, balls, wool, etc to incorporate touch and feel. This was followed by a rainbow parachute activity with songs and Makaton signing.

Chatelherault Country Park: A pupil from Larkhall Academy with ADHD was successfully supported through a year long work experience placement which provided a supportive and inclusive work setting where they were able to develop confidence, practical skills and experience in an outdoor working environment. The Park also hosted two employee volunteering and wellbeing days for Morgan Stanley and Education Resources and supported four placements through the Unpaid Work Scheme providing opportunities for individuals to complete community service whilst making a positive contribution to the local environment.

East Kilbride Ice Rink: The Inclusive Para Skating World Championships 2026 were held at the end of June. The event also welcomed Commonwealth Games Mascot Finnie who posed for photos with competitors and family members.

Delivering Strategic Objectives - Year 5 2026/27

Equality & Inclusion

We will provide accessible wellbeing and learning services through targeted interventions

Equality and Inclusion Successes

Bookbug in the Park: Chatelherault Country Park worked in partnership with the Libraries Team to host the popular Bookbug in the Park event attracting over 200 attendees across two morning sessions. This free family event provided the opportunity for children and parents to engage with reading, storytellying and outdoor activities in a welcoming environment. The increased footfall also generated significant visitor activity to ther cafe providing a welcoming boost to secondary spend and enhancing the overall visitor experience.

Summer of Sport - Inclusion: 9 additional multi-sport and stay and play sessions running to cater for ASN children across all four localities. Demand has been high for these sessions with close to 80 attendances across the sessions. This also included a new rebound therapy session at John Wright Sports Centre.

Developing Young Workforce: Three day event welcoming 1,500 pupils from P7 to S6 supporting young people at a key transition stage into and throughout high school.

Volunteer Evening: Over 60 volunteers and guests attended this event at Hamilton Palace Sports Ground Bowling Pavilion which celebrated volunteer achievements and aimed to increase participation. Highlights included inspiring presentations from volunteers who shared their experiences and positive impacts of working with local communities.

Corporate Training: Development works have also progressed in relation to the overall programme that continues to roll out during 2026/27.

Casual Employee Survey: At the end of the quarter, the 2026 Casual Employee Survey was completed with the findings to be reported to this board with actions being progressed this year to address the findings.

Delivering Strategic Objectives - Year 5 2026/27

Organisational Sustainability We will develop a business model that allows sustainable provision of quality services in priority areas			
Priority 1 (OS1)	**Priority 2 (OS2)**	**Priority 3 (OS3)**	**Priority 4 (OS4)**
Develop a financially sustainable business model which optimises income and utilises diverse funding streams.	**Develop our people** ensuring staff remain highly skilled and are supported to deliver the best standard of customer service.	**Review our facilities** to ensure we have financially sustainable spaces to enable quality service provision.	**Reduce waste and energy usage** and seek new ways to be more energy efficient across our services.

Organisational Sustainability Successes

Lanark Memorial Hall: Through the Transformation Fund, investment has been made into a new digital advertising system comprising of 6 internal and 3 external screens. This will allow the venue to give a higher audio/visual profile for marketing shows and events including the ability to display video adverts. In the future, they can potentiallty also be used to assist with signage compliance for Martin's Law.

James Hamilton Heritage Park: 13 tonnes of Phoslock product was applied to the loch over 3 days by a specialist contractor to restoreand improve water quality and remove reactive phosphorus.

Queen of the South Football Club: Hamilton Palace Sports Ground renewed its current three year partnership with the football club as their daily training venue.

M74 Pedestrian Underpass: Improvement works were carried out on the underpass linking Hamilton Palace Sports Ground and Strathclyde Country Park. The upgrade created a cleaner, brighter, graffiti free welcoming underpass for pedestrians and cyclists travelling between North and South Lanarkshire.

Scottish Cycling National MTB XC Champtionship: The event at Chatelherault Country Park attracted over 500 competitors across a range of age categories with a significant number of competitors. The event delivered just under £6,000 of additional income, demonstrating the value of partnership working, effective use of park facilities and the ability to generate sustainable income streams.

Delivering Strategic Objectives - Year 5 2026/27

Organisational Sustainability

We will develop a business model that allows sustainable provision of quality services in priority areas

Organisational Sustainability Successes

SLLC Process Modernisation Project: There has been a significant amount of progress in the migration to the new Front of House system including database development and configuration. The sub working groups of the modernisation project are progressing with preparation works for the go live of the new system and development of new business recommendations.

SLC Transformation Fund: Significant assistance continues to be provided by Finance and IT services to support the projects being implemented across the SLC Transformation Fund, including the implementation of WIFI and access technology provision.

Human Resources: Following the implementation of the workforce scheduling module of Fusion, the roll out to the new way of casual staff management has now commenced on a phased basis. HR Services continue to engage with SLC Corporate Services on enhancements to reporting information in relation to performance appraisal and overtime, with the Team also providing significant support to managers with complex employee support needs.

Year End Position and Audit: The period from April to June saw the completion of the year end accounts which are now in the process of being audited. Overall, the organisation finished in a overspend position for financial year 2025/26, the resultant impact being the use of a significant proportion of our available reserves. It is recognised that 2026/27 will continue to see financial challenges particularly in relation to property costs and securing income generation, something everyone continues to be mindful of as well as preparing and identifying potential solutions for the forecast budget gap in relation to 2027/28.

Growth Plan Update

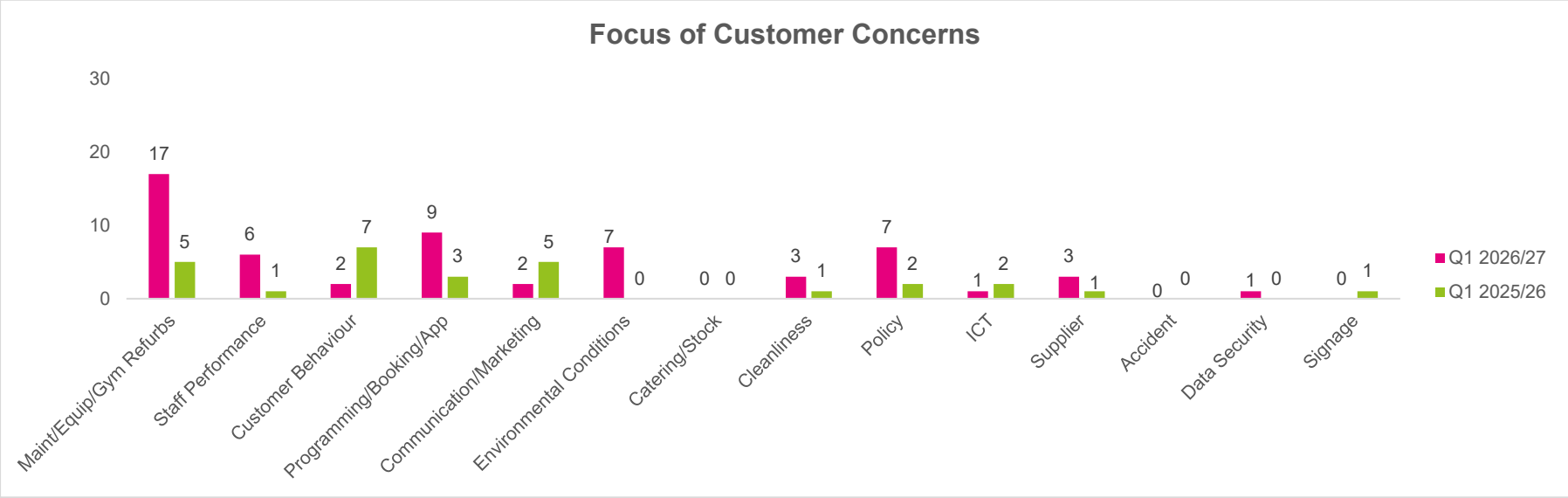
Sales and Retention	
Action	**Progress to Date**
Retain existing and attract new customers	We have continued to work alongside the cultural venues and in the first Quarter our paid for ads had a total spend of £952.68 with an income of £24,096.90 which is an return on advertising spend of £25.29. Although this is a quieter period, the return sales for the launch of panto were impressive.
Increase sales by capitalising on the introduction of new gyms and studios in order to gain new members.	This period also saw a gym studio refurb launch campaign which achieved 231,799 impressions across South Lanarkshire. There was also a push on Teen Gym Memberships (ahead of School Summer Holidays) which achieved 133,260 impressions across South Lanarkshire.
Diversify income streams for Calderglen Zoo	We are continuing to work in partnership with staff at Calderglen and figures for the first Quarter are as follows: Entry Donations & Gift Aid - £5,479 Animal Sponsorship - £730 (5 x bronze, 6 x silver and 4 x gold packages)
Increase customer awareness and uptake of wider provision.	Working in partnership with Hamilton Park, Business Development has been working with staff across various departments over the past few months in planning for the Community Race Day. The event takes place on Thursday 16 July, where over 2,000 attendees are expected. In addition, over 300 tickets have been distributed to community groups and families (in conjunction with SLC Employability team). A range of activities are planned, including ACE, Libraries and Museum activities across 3 areas of the venue.

Growth Plan Update

Events and Hospitality	
Action	**Progress to Date**
Increase film and television production revenue	Commercial filming activity continued to grow during Quarter 1. ITV drama Sutherland filmed at James Hamilton Heritage Park, generating £3,500 of location income. In addition, international creative partnerships saw Get Audibly (Germany) record at Hamilton Mausoleum to capture the site's unique acoustic properties, while Thinking Culture, in partnership with the University of Glasgow, presented a sonic sculpture installation by a Berlin based electronic musician within the Mausoleum, generating a further £2,100 of venue income. These projects continue to raise the profile of South Lanarkshire's unique heritage assets while supporting commercial income generation. Although filmed last year, Richard Gaad's production of Half Man aired on BBC this Quarter with the main filming from Ballerup Hall featured in Episode 2 and the courtroom scenes in Episode 3.

Fundraising and Sponsorship	
Action	**Progress to Date**
Increase external funding to support SLLC service provision	We had applied, however were unsuccessful in our bid for the Ecosystem Entrepreneurial Education Fund. Our application for £137,000 was to support the further development of the Future Pathways programme. We are continuing to explore opportunities around Open Funding and Creative Scotland Multi Year Funding projects.

Complaints & Information Security



Complaints & Information Security	Q1 2026/27	Q1 2025/26	Year on Year RAG Shift
Complaints	75	38	⊗
Information Security Incidents	2	0	⊗

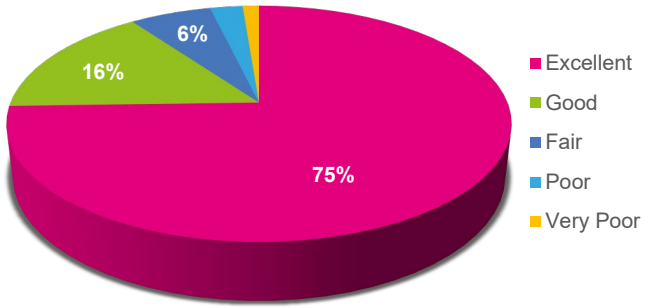
Notes and Analysis

Complaints: A total of 75 complaints were recorded across our services: Leisure Centres (60), Libraries (1), Outdoor (5), Culture (5), HQ (3) and Data Protection (1). Of these, 69 were Stage 1 complaints and six were Stage 2. At the end of Quarter 1, 58 were closed and 17 remained open.

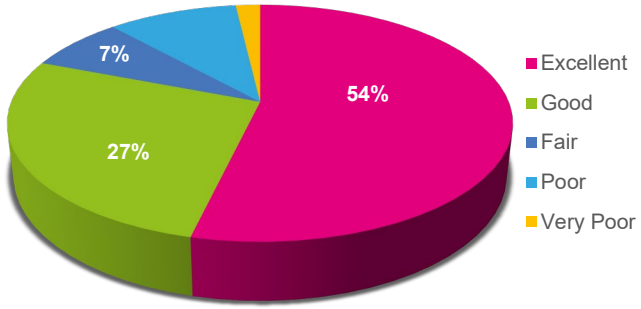
Information Security Incidents: Two low risk security incidents were reported - one was related to a procedural issue and means of contacting a member of the public whilst the other related to a technological error with regards to communication emailed to leisure members including those who had previously unsubscribed.

Customer Satisfaction - How Did We Perform

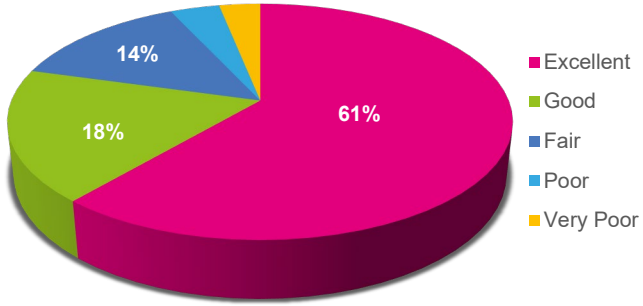
Staff Performance
Top 3 Responses - 97%



Cleanliness
Top 3 Responses - 88%



Value for Money
Top 3 Responses - 93%



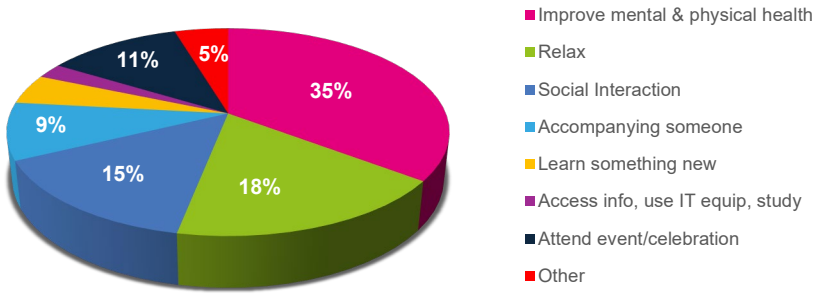
Notes and Analysis

Quarter 1 saw 162 completed customer satisfaction surveys, continuing a consistent trend of excellent results with an overall satisfaction rate of 94%. This reflects the ongoing commitment of staff to high standards and quality service delivery. Satisfaction levels can be further broken down across specific service areas:

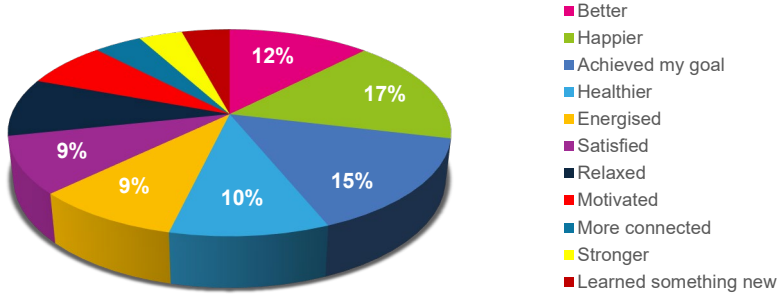
- Staff Performance 97%
- Cleanliness 88%
- Value for Money 93%
- Quality of equipment/services 90%

Customer Satisfaction - Health & Wellbeing

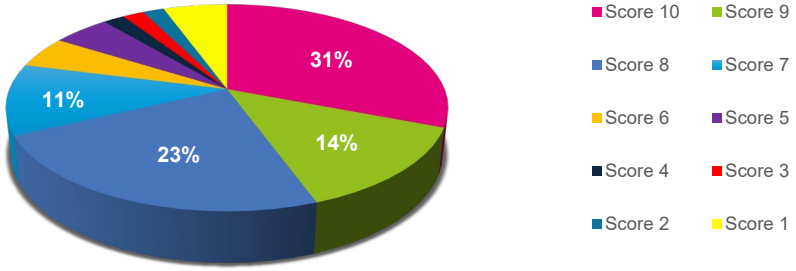
Reason for Visit
Top 6 Responses - 93%



Following your visit, how did you feel?
Top 6 Responses - 72%



Did your visit impact positively on your health?
79% scored 7 and above



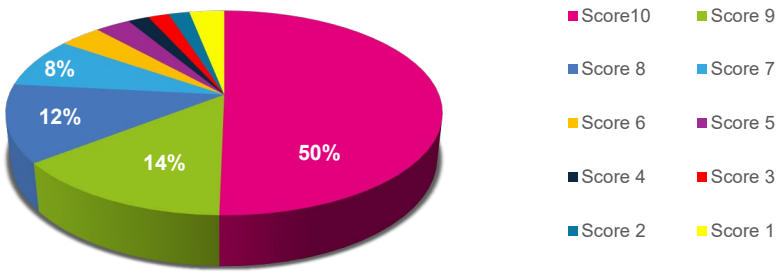
Notes and Analysis

Customers visit our sites for a variety of reasons, whatever the reason we welcome and encourage them:

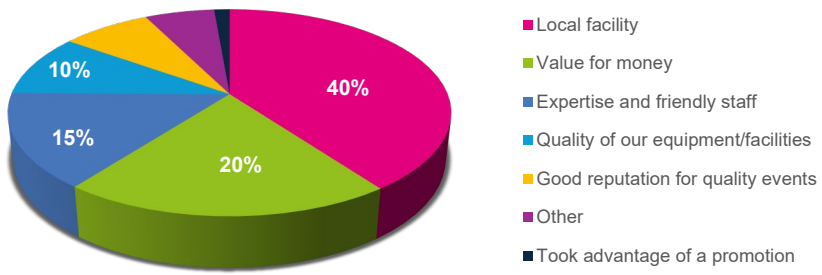
- 35% said it's about improving their physical and mental health
- 16% said a place to relax
- 15% said a place to socialise
- 14% said to attend a show or event
- 72% said they felt better; happier; achieved their goal; felt healthier; more energised; satisfied
- 79% said their visit had a positive impact on their health and wellbeing

Customer Satisfaction - Communication

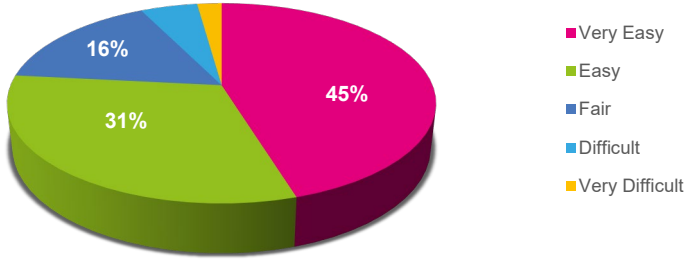
84% of customers would recommend SLLC to a friend (Scored 7 and above)



Why customers chose SLLC Top 4 Responses - 85%



Experience of using website and social media Top 3 Responses - 92%



Notes and Analysis

Word of mouth is always a great recommendation and 84% of customers said they would recommend us to a friend. When asked how customers heard about SLLC, they responded:

- 42% word of mouth; 25% other; 14% website; 10% social media; 9% advertising
- 93% said they found our website and social media pages easy to navigate
- 87% said that the booking process was fair to very easy to use

Customer Recognition

I'm a regular user of the gym at **Larkhall Leisure Centre**. I've found staff members there to be friendly and approachable. I spoke with a new member of staff, who had been told my name by a manager, and found him to be very personable and professional. I also saw that he carefully cleaned the gym and equipment while I was there and I let him know I was impressed by how thorough his work was.

I attended the Soul and Motown Show at **Rutherglen Town Hall** in April. The show was very good and I have filled in the Audience Survey Form.

Hamilton Palace Sports Grounds proved to be an excellent venue for our Easter camp, providing a safe and high quality environment for the children to enjoy throughout the two weeks. The facilities were first class and ideal for delivering the programme. Just as importantly if not more so, the staff were outstanding from start to finish, always friendly, approachable and extremely accommodating to anything we needed. Their support, professionalism and welcoming attitude played a huge part in helping the camp run smoothly each day.

I have rejoined **Coalburn Leisure Centre** after a long spell away. All the staff are amazing. Being an injured military veteran, visually impaired/registered blind and having leg damage, the staff always check to see if I am ok and needing any assistance. Reception staff are also a credit. The whole new set up is superb and the whole centre and pool is absolutely spotless. As we would say in the military 'Bravo Zulu'. Keep up the good work and thank you all so much.

Margaret helped me find newspaper articles for my family history research at **Hamilton Town House Library.** She was very patient and kind and it was easy to understand her instructions

Having recently had hip surgery, I came to **Strathaven Leisure Centre** to try walking in water. From the moment I walked in, I was made to feel extremely welcome, the staff cared and asked questions that were genuine. I took out a membership as planning on coming a lot. I was there three times this week and every time I went in, I got a smile and asked how I was. Too many people are ready to complain but credit where it is due, you have fabulous staff working for you.

Thank you for the service provided at **Hamilton Sports Grounds** for the Club Sport Hamilton (formerly Hamilton Sports Council) David Cooper Primary Schools Soccer Sevens Tournament.

Some friends and I visited **Chatelherault Country Park** and walked from the visitor centre to the Green Bridge and back before visiting the market. We thoroughly enjoyed our visit.

SOUTH LANARKSHIRE
Leisure & Culture

Agenda Item
14

Report

Report to:	**Board of Trustees**
Date of Meeting:	**02 September 2026**
Report by:	**Ross McKie, Head of Corporate Services**

Subject:	**SLLC Employee Survey Findings and Action Plan**

1. Background

1.1. The purpose of the report is to:

- Provide the Board with an overview of the SLLC Employee Survey findings and related action plan that has been developed in conjunction with Employees.

2. Recommendation

2.1. The Board is asked to approve the following recommendation:

(1) That the content of the report be noted.

3. Background

3.1. During late June / early July, a full survey of the SLLC casual workforce took place with a total of 39 taking part, equating to a response rate of approximately 6% of the registered casual workforce.

3.2. The survey itself covered three different sections including:

- A general survey of casual employee views.
- A section dedicated to identifying how employees wish to be communicated with regarding organisational updates/news.
- The identification of employee values in terms of what attracted our employees to SLLC, what keeps our employees working with SLLC, and how these are important going forward.

3.3. Following a comprehensive review by the Leadership Team and Extended Management Team during January and February, the summary findings were made available to all employees. Managers in conjunction with their teams co-developed the actions they felt were required to be addressed at a team, service and organisation.

3.4. The findings of the communication section of the survey have also been reviewed by the communication and engagement working group with the aim of implementing changes to our ongoing communication with employees based on their views and preferences.

4. Employee Survey Findings

4.1. Table 1 overleaf provides a summary of the response rate by service area:

Table 1 – Employee Survey Response by Service

Area	Response Rate
Sports and Leisure Sites	4%
Country Parks and Outdoor	10%
Cultural Venues	7%
Libraries and Museums	9%
Halls	7%
Grand Total	6%

This is the first time a specific survey of the casual workforce has taken place and therefore there is no benchmark to compare in terms of service or total participation uptake. Having now completed the cycle, it is hoped that this encourages more employees to complete the survey in future years.

4.2. The overall results of the survey are detailed in Appendix 1, with information on equalities characteristic data contained within Appendix 2.

Table 2 below provides an overview of the main takeaways from the survey as identified through analysis.

Table 2 – Employee Survey Findings

Strengths	Areas for Improvement
Overall Positive Response	Greater Praise and recognition
Casual work gives high degree of work flexibility	
Continuing desire to work for SLLC on casual basis.	Opinions not being heard or considered
Team working continues to show positively as was the case in the overall employee survey	

4.3. In relation to the employees who took the opportunity to provide other feedback, there were only 4 responses which covered the following themes:

- Shift Management and Notification
- Process variances across sites
- Training and Availability of Casual Staff

The survey results and action plan have been shared with the Trade Unions and any feedback received will be considered when developing future surveys.

4.4. The overall action plan outlines the positive actions that can be taken forward and is detailed in Appendix 3.

5. Next Steps

5.1. The action plan will now be implemented with progress tracked throughout the year with further feedback being sought from employees on the perceived impact of the changes.

5.2. Plans are being developed for further survey engagement with our permanent, fixed term and seasonal employees with updates provided to board on proposals.

6. Employee Implications

6.1. The employee implications are as detailed within the report.

7. Financial Implications

7.1. There are no anticipated financial implications as a result of this report.

8. Other Implications

8.1. There are no other implications in terms of risk and sustainability.

9. Equality Impact Assessment and Consultation Arrangements

9.1. There is no requirement to carry out an impact assessment or consultation in terms of the proposals contained within this report.

Ross McKie
Head of Corporate Services

2 September 2026

Links to SLLC Objectives

- Organisational Sustainability
- Health and Wellbeing
- Connected and Engaged
- Equality and Inclusion

Previous References

- None

List of Background Papers

- None

Contact for Further Information

If you would like to inspect the background papers, if any, or want further information, please contact:

Ross McKie, Head of Corporate Services
Ext: 8454320 (Tel: 01698 454320)
E-mail: ross.mckie@southlanarkshireleisure.co.uk

Appendix 1

Casual Employee Survey – Overall Results

Theme	Questions	Average Response	%Positive
Overall	I am satisfied in the casual work I undertake for SLLC	Somewhat Agree	79.49%
Engagement	I find my shifts to be engaging	Somewhat Agree	69.23%
Engagement	I would recommend SLLC as a great place to work	Somewhat Agree	69.23%
Casual Work	I am satisfied with how shifts are offered and allocated	Somewhat Agree	71.79%
Casual Work	I receive clear and timely information about shifts and any changes	Somewhat Agree	69.23%
Casual Work	I receive clear information as to the tasks I will be required to complete at the onset of my shift	Somewhat Agree	74.36%
Casual Work	I will continue to accept casual work when offered by SLLC	Agree	83.67%
Casual Work	I have the materials and equipment that I need for my shift	Somewhat Agree	71.43%
Casual Work	I think any opinions I raise during my shift are considered	Somewhat Agree	67.35%
Casual Work	I believe that the team I work with as part of my shift work well together	Agree	79.59%
Individual Needs	I regularly receive recognition or praise for good work	Somewhat Agree	63.27%
Individual Needs	My casual work gives me the flexibility to meet the needs of my personal life	Agree	83.67%
Individual Needs	My shift manager cares about me as a person	Somewhat Agree	73.47%
Diversity and Inclusion	I trust SLLC to be fair	Somewhat Agree	67.35%
Diversity and Inclusion	I work in an environment where my values, culture and personal ambitions are both respected and supported	Somewhat Agree	75.51%

Appendix 2

Employee Equalities Characteristics (Based on overall Metric – I am satisfied working for SLLC)

Overall Summary

- Age – Some evidence of lower satisfaction in the middle age groups relative to the overall response.
- Gender – Higher levels of females reporting satisfaction working at SLLC than males.
- Religious Beliefs – Varying response compared to those with beliefs and those without.
- No strong variation in other responses.

Characteristic - Age	16 - 24 years	25 - 34 years	35 - 44 years	45 - 54 years	55 - 64 years	65 years or over	Prefer not to say	Did not Complete	Grand Total
Strongly Agree	10.00%	16.67%	0.00%	0.00%	50.00%	100.00%	50.00%	0.00%	16.33%
Agree	55.00%	66.67%	100.00%	28.57%	0.00%	0.00%	0.00%	50.00%	46.94%
Somewhat Agree	20.00%	0.00%	0.00%	28.57%	0.00%	0.00%	50.00%	50.00%	18.37%
Somewhat Disagree	0.00%	0.00%	0.00%	14.29%	25.00%	0.00%	0.00%	0.00%	4.08%
Disagree	5.00%	16.67%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	4.08%
Strongly Disagree	10.00%	0.00%	0.00%	28.57%	25.00%	0.00%	0.00%	0.00%	10.20%
'Response %	**40.82%**	**12.24%**	**8.16%**	**14.29%**	**8.16%**	**4.08%**	**4.08%**	**8.16%**	**100.00%**

Characteristic - Gender	Female	Male	Prefer not to say	Did not Complete	Grand Total
Strongly Agree	24.00%	10.53%	0.00%	0.00%	16.33%
Agree	44.00%	52.63%	0.00%	50.00%	46.94%
Somewhat Agree	12.00%	15.79%	100.00%	50.00%	18.37%
Somewhat Disagree	4.00%	5.26%	0.00%	0.00%	4.08%
Disagree	4.00%	5.26%	0.00%	0.00%	4.08%
Strongly Disagree	12.00%	10.53%	0.00%	0.00%	10.20%
'Response %	**51.02%**	**38.78%**	**2.04%**	**8.16%**	**100.00%**

Appendix 2 (cont.)

Employee Equalities Characteristics (Based on overall Metric - I am satisfied working for SLLC)

Characteristic – Caring Responsibilities	No caring responsibilities	Yes, (other)	Yes, childcare (under 18)	Prefer not to say	Did not complete	Grand Total
Strongly Agree	12.12%	50.00%	14.29%	66.67%	0.00%	16.33%
Agree	51.52%	50.00%	42.86%	0.00%	50.00%	46.94%
Somewhat Agree	12.12%	0.00%	28.57%	33.33%	50.00%	18.37%
Somewhat Disagree	3.03%	0.00%	14.29%	0.00%	0.00%	4.08%
Disagree	6.06%	0.00%	0.00%	0.00%	0.00%	4.08%
Strongly Disagree	15.15%	0.00%	0.00%	0.00%	0.00%	10.20%
'Response %	**67.35%**	**4.08%**	**14.29%**	**6.12%**	**8.16%**	**100.00%**

Characteristic - Orientation	Heterosexual (Straight)	Lesbian	Prefer not to say	Did not complete	Grand Total
Strongly Agree	20.51%	0.00%	0.00%	0.00%	16.33%
Agree	51.28%	0.00%	25.00%	50.00%	46.94%
Somewhat Agree	15.38%	0.00%	25.00%	50.00%	18.37%
Somewhat Disagree	2.56%	0.00%	25.00%	0.00%	4.08%
Disagree	5.13%	0.00%	0.00%	0.00%	4.08%
Strongly Disagree	5.13%	100.00%	25.00%	0.00%	10.20%
'Response %	**79.59%**	**4.08%**	**8.16%**	**8.16%**	**100.00%**

Characteristic – Ethnic Background	White	Mixed(Multiple Ethnic Groups)	Prefer not to say	Did not complete	Grand Total
Strongly Agree	18.60%	0.00%	0.00%	0.00%	16.33%
Agree	46.51%	100.00%	0.00%	50.00%	46.94%
Somewhat Agree	13.95%	0.00%	100.00%	50.00%	18.37%
Somewhat Disagree	4.65%	0.00%	0.00%	0.00%	4.08%
Disagree	4.65%	0.00%	0.00%	0.00%	4.08%
Strongly Disagree	11.63%	0.00%	0.00%	0.00%	10.20%
'Response %	**87.76%**	**2.04%**	**2.04%**	**8.16%**	**100.00%**

Appendix 2 (cont.)

Employee Equalities Characteristics (Based on overall Metric - I am satisfied working for SLLC)

Characteristic - Nationality	Scottish	British	Other	Did not complete	Grand Total
Strongly Agree	17.07%	33.33%	0.00%	0.00%	16.33%
Agree	46.34%	33.33%	100.00%	50.00%	46.94%
Somewhat Agree	17.07%	0.00%	0.00%	50.00%	18.37%
Somewhat Disagree	4.88%	0.00%	0.00%	0.00%	4.08%
Disagree	4.88%	0.00%	0.00%	0.00%	4.08%
Strongly Disagree	9.76%	33.33%	0.00%	0.00%	10.20%
'Response %	**83.67%**	**6.12%**	**2.04%**	**8.16%**	**100.00%**

Characteristic – Religious Beliefs	None	Church of Scotland	Roman Catholic	Buddhist	Prefer not to say	Did not complete	Grand Total
Strongly Agree	8.33%	25.00%	16.67%	100.00%	33.33%	0.00%	16.33%
Agree	50.00%	37.50%	66.67%	0.00%	33.33%	50.00%	46.94%
Somewhat Agree	20.83%	0.00%	16.67%	0.00%	16.67%	50.00%	18.37%
Somewhat Disagree	4.17%	12.50%	0.00%	0.00%	0.00%	0.00%	4.08%
Disagree	4.17%	12.50%	0.00%	0.00%	0.00%	0.00%	4.08%
Strongly Disagree	12.50%	12.50%	0.00%	0.00%	16.67%	0.00%	10.20%
'Response %	**48.98%**	**16.33%**	**12.24%**	**2.04%**	**12.24%**	**8.16%**	**100.00%**

Characteristic - Disability	No	Yes	Did not Complete	Grand Total
Strongly Agree	20.00%	10.00%	0.00%	16.33%
Agree	42.86%	60.00%	50.00%	46.94%
Somewhat Agree	20.00%	0.00%	50.00%	18.37%
Somewhat Disagree	2.86%	10.00%	0.00%	4.08%
Disagree	2.86%	10.00%	0.00%	4.08%
Strongly Disagree	11.43%	10.00%	0.00%	10.20%
'Response %	**71.43%**	**20.41%**	**8.16%**	**100.00%**

Appendix 3

Action Plan

Action	Specific Activity
Low Praise and Recognition	Reminder sent to all managers that there should be appropriate recognition given to casual employees during shifts worked. Reminder that casual employees can also be nominated via the employee recognition scheme.
Organisational Trust and Communication	Ensure casual employees have access to tailored communication around process changes and service updates.
Opinions not being heard or considered	Launch E-form link for casual employees to give suggestions or ideas.
Shift Management and Notification	This will be considered in line with the rollout of the casual workforce management function and the processes regarding notification and access to shifts.

SOUTH LANARKSHIRE
Leisure & Culture

Agenda Item

15

Report

Report to:	**Board of Trustees**
Date of Meeting:	**2 September 2026**
Report by:	**Martin Cryans, Head of Business Development**

Subject:	**Summer of Sport**

1. Purpose of Briefing Paper

1.1. The purpose of this paper is to:-

- Inform the Board of the programme of events being rolled out across South Lanarkshire using the Summer of Sport funding from Sportscotland.

2. Recommendations

2.1. The Board is asked to note the following recommendation(s): -

(1) That the contents of the report, be noted.
(2) That the Sportscotland funding as allocated to local authority partners, through existing investment mechanisms, be noted.

3. Background

3.1. Following the confirmation of the Scottish Government Budget on 25 February 2026, Sportscotland allocated local partners a one-off, single-year investment for the Summer of Sport.

3.2. This £12 million budget was distributed across all 32 local authorities to celebrate and capitalise on a spectacular Summer of Sport, providing accessible and inclusive sporting opportunities for children and young people.

3.3. South Lanarkshire Council was allocated £713,000 for the 2026/27 financial year. This allocation is based on a funding formula agreed by Sportscotland, the Scottish Government and COSLA. Funding is to be utilised from June 2026 - March 2027.

3.4. The intent of the policy is to provide free or reduced cost activity, inclusive opportunities for children and young people aged 3-26 to get active, stay active and improve their lives, with a particular focus on reducing barriers to participation and addressing poverty-related inequality. Activities across South Lanarkshire are free. The investment is designed to strengthen pathways into sustained participation in school, club, and community sport. The key principles of the funding centre on partnership, co-creation, inclusion and sustainability.

3.5. Clubs affiliated with SLLC ClubSL programme had the opportunity to apply for grants to deliver to targeted groups in line with the guidance supported by Sportscotland.

4. Programme of Events

4.1. SLLC as the Council's lead partner in sport and physical activity, has played a key role in developing the programme of events, in partnership with officers within Education Resources at SLC, which aligns with the priorities set out within the Summer of Sport guidance. A copy of the programme is attached as Appendix 1.

4.2. Programme communications were delivered by the SLLC marketing team in conjunction with the Council's communications team, connected directly with the Summer of Sport marketing via Sportscotland to ensure branding and one-off funding aligned.

5. Governance

5.1. Arrangements fall in line with the existing SportScotland reporting framework which consists of both a financial performance tracker, which is signed off by South Lanarkshire Council's Head of Finance, and the Active Schools Monitoring Outcomes Report. This is in addition to both South Lanarkshire-specific and regional liaison meetings with the SLLC SportScotland Partnership Manager.

6. Monitoring of Performance

6.1. To understand the impact of the Summer of Sport funding, local authorities have been asked to use existing data collation methods to provide information on a focussed set of data relevant to the funding. This information includes, but not limited to:

- Number and range of delivery partners
- Number and range of sessions delivered
- Number of children and families engaged (including % from target groups)
- Number of new coaches and volunteers engaged.

6.2. This will be supported by a national participant survey and a proposed wider externally commissioned evaluation which partners may be asked to engage in.

7. Employee Implications

7.1. Two additional officers have been appointed to aid delivery of the Summer of Sport programme across South Lanarkshire.

8. Financial Implications

8.1. An allocation of £713,000 from Summer of Sport funding was made to SLLC.

9. Other Implications

9. There are no risks or other implications as a result of this report.

10. Integrated Impact Assessment and Consultation Requirements

10. There are no impact assessment or consultation required to be undertaken as a result of this report.

Martin Cryans
Head of Business Development

2 September 2026

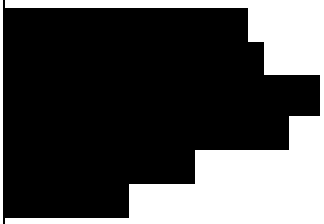
Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:

Martin Cryans, Head of Business Development
Martin.Cryans@southlanarkshireleisure.co.uk

Appendix 1

Activity	Target Group	Key contact	Partner
Ice skating	Universal	[redacted]	SLLC
Heritage Park (Boating activities and education sessions with raft building, water activities/water safety)	Universal/Care Experienced YP	[redacted]	SLC
Outdoor Learning & Adventure (Kayaking, abseiling, water sports, camping)	Targeted -Referral basis via social work/YCFL referral	[redacted]	YCFL
World Cup Inspired Football sessions	Universal - SIMD/Rural focus	[redacted]	Education
Commonwealth Games multi-sports	Universal /Club focused	[redacted]	Scottish Governing Bodies/Residents groups/3rd sector
Golf	Universal /Targeted	[redacted]	YCFL
Coach Education	Universal /Targeted	[redacted]	Employability/ Scottish Governing bodies
Employability opportunities	Lifeguard Swim Teacher Dancer Leader Lead Sports Coach	[redacted]	Leadership enhancement PE Departments/ Education
Local Club memberships through CubSL (affiliation/governance process)	Targeted	[redacted]	Clubs Scottish Governing Bodies
Club funding grants /Our Place our Plan Groups	Universal	[redacted]	Sportscotland Scottish Governing Bodies OPOP groups
Sporting Equipment to all schools in South Lanarkshire	Universal	[redacted]	Education
Youth Family Community Learning offering to widen service offer	Access to wide range of service for free	[redacted]	YCFL
Bespoke offering via mapping Utilising our current data to ensure areas of low income, ASN and care experienced groups have activities located within communities.	Focus on activities utilising spaces connected to communities Memberships	[redacted]	SLLC Communities and Education team Our Place Our Plan groups
Activity	**Target Group**	**Key contact**	**Partner**

Leadership	Enhancing our current offer: Sports Coach Academy Dance Leaders Netball Academy Sports Leaders Young Peoples Sport Panel Volunteering		PE departments /Scottish Governing Bodies
ASN Offering Enhancement	Enhancing our current programme ASN ACE Offering Holiday club support for families Christmas holiday support for families Considering wider offering to ensure equipment/staff training can ensure all ASN pupils have opportunities		Education /Social work /NHS
Development Officer Administration Officer Casual (non-contracted) recruitment where needed (9months)	Ensuring compliance with ClubSL Adding clubs/Groups as suppliers on Fusion Monitoring and evaluation in line with Sportscotland Funding criteria.		SLLC Youth Community Family Learning Health (NHS) Education Social Work Scottish Governing Bodies Sportscotland Fire and Rescue Our Place Our Plan groups Additional partners tbc
Wider experiences	Away day experiences for targeted groups		Education
Free Swimming offer	TBC Separate Funding via Scottish Swimming		SLLC/Scottish Swimming guidance to follow
Outdoor Recreation	Assistance with football pitch openings (on grass) to ensure nets/lines are available		Housing & Tech

SOUTH LANARKSHIRE
Leisure & Culture

Report

Agenda Item
16

Report to:	**Board of Trustees**
Date of Meeting:	**2 September 2026**
Report by:	**Nick Lansdell, Chief Executive**

Subject:	**Health and Wellbeing Outcomes Research Proposal**

1. Purpose of Report

1.1. The purpose of the report is to:

- To seek the Board's approval to explore and scope a research and evaluation programme that evidences the contribution of leisure and culture to health and wellbeing outcomes, using a place-based approach rooted in South Lanarkshire

2. Recommendation

2.1. The Board is asked to approve the following recommendations:

(1) Approval of further exploration and development of a research and evaluation proposal examining the contribution of leisure and culture to health and wellbeing outcomes. The proposed project would be locally focused within South Lanarkshire while generating learning and evidence of potential national relevance.

3. Background

3.1. There is a substantial evidence base demonstrating the positive impact of physical activity on health outcomes. Regular participation in physical activity is associated with lower rates of diabetes, depression, cardiovascular disease, stroke and osteoporosis-related fractures.

3.2. While the evidence base for arts and cultural participation is less mature, it continues to grow. The World Health Organization (WHO)'s 2019 scoping review identified a significant role for arts and culture in promoting health and wellbeing, preventing ill-health and supporting the management and treatment of a range of health conditions. The WHO also articulates clearly that addressing health and wellbeing successfully is dependent on cross sectoral partnership.

3.3. The World Health Organisation points to the four dimensions of organisational activity in health and wellbeing services – Promotion, Prevention, Intervention and Treatment. SLLC provides services in leisure and culture across all of these dimensions, and is well placed to undertake evaluation, in order to inform policy and resourcing at local level and beyond.

3.4. As Trustees are aware, an approach for reporting annually to the Council on Outcomes is already agreed for the Strategic Commissioning Plan, and early work is already engaged to this end. As such, this proposal builds on and develops that early commitment.

3.5. Initial discussions with Health Improvement Scotland and Public Health Scotland have highlighted a potential opportunity to develop a locally-based research project that contributes to both local learning and the wider national conversation on prevention, wellbeing and health inequalities.

4. Considerations and Discussions To-Date

4.1 In April 2026, the Chair of South Lanarkshire Leisure and Culture (SLLC) convened an exploratory discussion involving the Chief Executive, the Head of Strategy and Governance and Dr Angela Beggan, Trustee. The purpose of the meeting was to consider the potential for SLLC to lead or support a research and evaluation programme that examines the outcomes generated through leisure and cultural participation. Key themes emerging from that discussion are summarised below.

4.2 SLLC is well positioned to support such a programme because:

- Health and wellbeing is the central organising principle of the current SLLC Strategy.
- Development of the 2027–2032 Strategic Plan provides an opportunity to strengthen the evidence base underpinning future priorities
- SLLC maintains strong and established partnerships with South Lanarkshire Council, NHS Lanarkshire and the Community Planning Partnership
- SLLC is a key contributor to the Council's place-based Estates Strategy
- SLLC plays an active role in the South Lanarkshire Marmot agenda and wider efforts to address inequalities
- SLLC is developing outcomes-based reporting arrangements aligned to the Council's Strategic Commissioning Plan
- SLLC's integrated leisure and cultural model provides a unique opportunity to explore the combined contribution of these services to prevention and wellbeing outcomes

4.3 The envisaged research aim would be:

- To evaluate the contribution of leisure and cultural participation to the health, wellbeing and social outcomes of people and communities in South Lanarkshire, and to assess its value within Scotland's preventative public health and health inequalities agenda

4.4 The sub aims of the research would be:

- Map and analyse existing leisure, arts and cultural activity that contributes to health and wellbeing outcomes in South Lanarkshire.
- Assess the impact of participation on individual wellbeing, social connectedness and community resilience
- Examine how place-based approaches contribute to prevention and help reduce inequalities
- Explore the contribution of leisure and culture to a preventative public service model and the reduction of future demand on health and care services.
- Evaluate wider social benefits including educational attainment, employability, workforce participation and environmental outcomes
- Assess whether the integrated delivery of leisure and cultural services generates enhanced outcomes, increased reach or more effective preventative pathways.
- Generate evidence and learning that can inform local practice and national policy development
- Co-produce a practical evaluation framework capable of application across local authorities and partner organisations

4.5 It is envisaged that the project would adopt a place-based approach focused on South Lanarkshire while generating evidence and learning that may be transferable across Scotland. Such an approach would:

- Support strong local ownership and participation
- Generate credible evidence grounded in practice
- Contribute to national policy discussions around prevention, wellbeing and inequalities
- Strengthen the evidence base for leisure and cultural investment
- Support wider advocacy aligned to COSLA's preventative reform agenda

4.6 While the project could explore both leisure and culture, early discussions indicate particular value in focusing on arts and cultural participation, where significant evidence gaps remain. Such a focus would complement existing research on physical activity while exploring the unique contribution of cultural engagement to prevention, wellbeing, social connectedness and place.

4.7 However, given SLLC's integrated operating model, consideration should also be given to understanding the additional value created through the combined delivery of leisure and cultural services.

5. Next Steps

5.1. Subject to Board approval, officers will engage with relevant partners, including the Council, South Lanarkshire health agencies, academic institutions, Health Improvement Scotland and Public Health Scotland, to:

- Further refine the scope of the proposed research
- Assess potential methodologies and evaluation frameworks
- Identify opportunities for collaboration and co-production
- Explore governance arrangements
- Investigate potential funding routes and research partnerships

5.2. A further report will be presented to the Board outlining detailed proposals, resource implications and recommended next steps.

6. Employee Implications

6.1. There are no employee implications as a result of this report, however resources will be required to manage the project.

7. Financial Implications

7.1. No funding source has yet been identified. Should the proposal progress, potential funding opportunities and associated financial implications will be explored and reported to the Board.

8. Other Implications

8.1. There are no other implications in terms of risk and sustainability.

9. Equality Impact Assessment and Consultation Arrangements

9.1. There is no requirement to carry out an impact assessment or consultation in terms of the proposals contained within this report.

Gillian Simpson
Head of Strategy and Governance

2 September 2026

Links to SLLC Objectives

- Health and Wellbeing
- Connected and Engaged
- Equality and Inclusion

Previous References

- None

List of Background Papers

- None

Contact for Further Information
If you would like to inspect the background papers, if any, or want further information, please contact:

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