central midlands audit partnership

Ashfield District Council – Audit Progress Report

Audit Committee: 27th July 2020

Ashfield
DISTRICT COUNCIL

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Our Vision

Through continuous improvement, the central midlands audit partnership will strive to provide cost effective, high quality internal audit services that meet the needs and expectations of all its partners.

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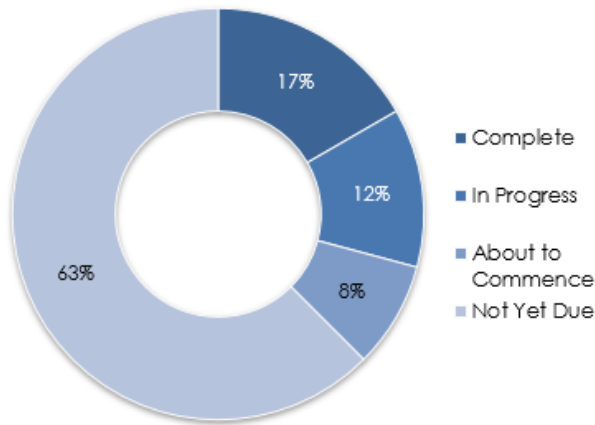Tel. 01332 643282
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CM AP central midlands audit partnership

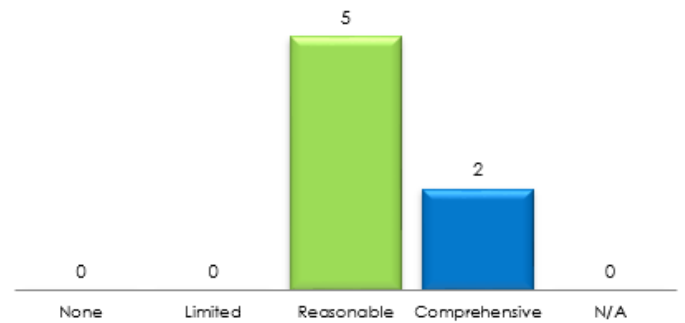*Providing Excellent Audit Services in the Public Sector*

AUDIT DASHBOARD
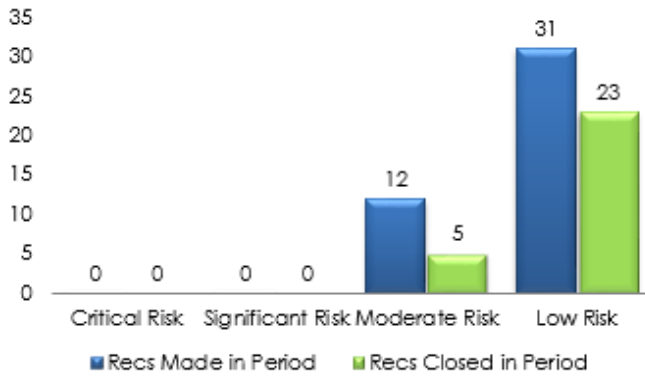
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Plan Progress

- Complete — 17%
- In Progress — 12%
- About to Commence — 8%
- Not Yet Due — 63%

Assurance Ratings

Control Assurance Ratings Issued During Period

None	Limited	Reasonable	Comprehensive	N/A
0	0	5	2	0

Recommendations

Movement During Period

	Critical Risk	Significant Risk	Moderate Risk	Low Risk
Recs Made in Period	0	0	12	31
Recs Closed in Period	0	0	5	23

Recommendations

Recommendations Currently Open

	Critical Risk	Significant Risk	Moderate Risk	Low Risk
Revised Target	0	0	22	21
Target Past	0	0	2	8
Future Target	0	0	7	15
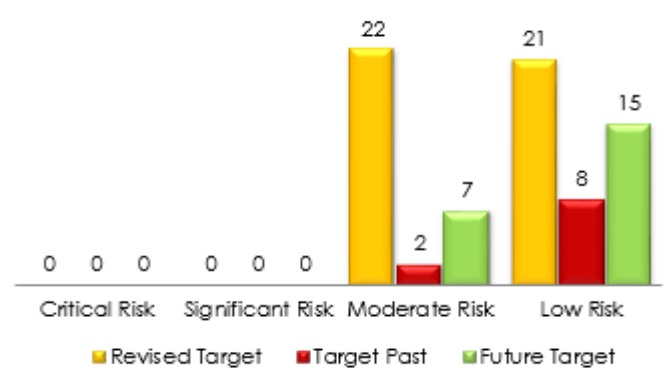
Recommendations

Overdue Recommendations

	3 Months <	3 - 6 Months	6 - 12 Months	12 Months >
Critical Risk	0	0	0	0
Significant Risk				
Moderate Risk	6	7	7	4
Low Risk	10	1	15	3
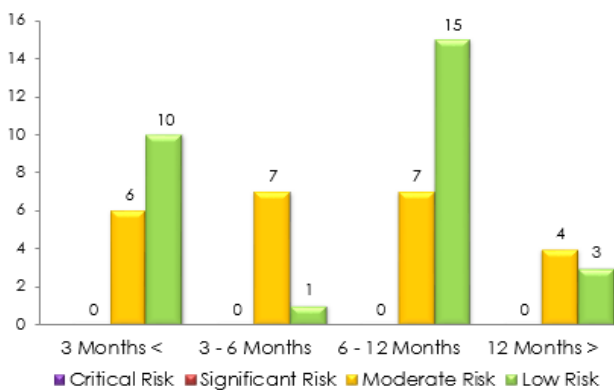
Customer Satisfaction

Returns Between Jan 2020 & Jul 2020

Overall Rating	Excellent	Good	Fair	Poor	Very Poor
Number of Returns	2	2	0	0	0
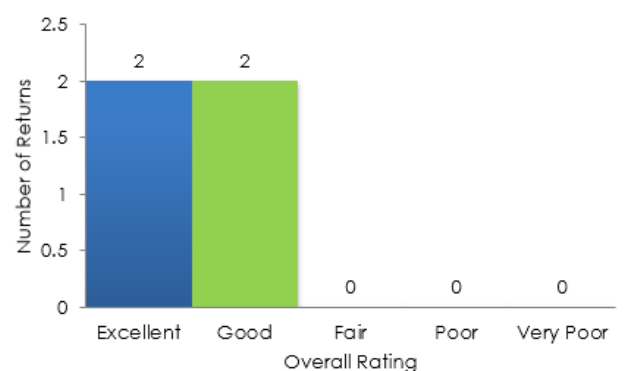
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AUDIT PLAN

Progress on Audit Assignments

The following table provides the Committee with information on how audit assignments were progressing as at 9th July 2020.

2020-21 Jobs	Status	% Complete	Assurance Rating
Anti-Fraud & Corruption	Not Allocated	0%	
Business Continuity & Emergency Planning	Not Allocated	0%	
Main Accounting Systems	Not Allocated	0%	
Taxation	Not Allocated	0%	
Creditors	Not Allocated	0%	
IT Applications	Not Allocated	0%	
ICT Infrastructure	Not Allocated	0%	
Corporate Improvement/Transformation	Not Allocated	0%	
Risk Registers	Not Allocated	0%	
Contracts Register	Allocated	0%	
Commercial Property Portfolio	Not Allocated	0%	
Procurement	Not Allocated	0%	
Debtors	Not Allocated	0%	
People Management	Not Allocated	0%	
Payroll	Not Allocated	0%	
Complex Case Work	Allocated	10%	
Environmental Protection	Not Allocated	0%	
Disabled Facilities Grants	In Progress	75%	
Rent Control	Draft Report	95%	
B/Fwd Jobs	**Status**	**% Complete**	**Assurance Rating**
Medium Term Financial Plan	Final Report	100%	Reasonable
Creditors 2019-20	Final Report	100%	Comprehensive
Anti-Fraud & Corruption 2019-20	Final Report	100%	Reasonable
Digital Transformation	Final Report	100%	Reasonable
Transformation Project Assurance	In Progress	60%	
E-Payments*	Final Report	100%	Comprehensive
Homelessness*	Final Report	100%	Reasonable
Information Governance*	Final Report	100%	Reasonable

*Reports finalised during 2019-20 so not b/fwd into 2020-21 but not yet reported to Committee.

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Audit Plan Changes

The People Management audit was removed from 2019-20 plan to allow for additional time to be spent on recommendation follow up work. A People Management audit has been included in the 2020-21 Audit Plan.

It is highly likely that the delivery of the 2020-21 Audit Plan will be affected by the Covid-19 pandemic. The disruption to services caused by the lockdown, staff secondments into front-line services and increased sickness levels will inevitably lead to delays in our audits and a reduction in audit coverage. We are not currently in a position to determine exactly what that reduction will be. Accordingly, we have not yet make any changes to the 2020-21 Audit Plan at this time, but we are envisaging that audit work on the Business Support Grants will be introduced. We anticipate that further updates on revisions to the Audit Plan will be brought to the next Audit Committee meeting.

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AUDIT COVERAGE

Completed Audit Assignments

Between 4th December 2019 and 9th July 2020, the following audit assignments have been finalised since the last progress update was given to the Audit Committee.

Audit Assignments Completed in Period	Assurance Rating	Recommendations Made				% Recs Closed
		Critical Risk	Significant Risk	Moderate Risk	Low Risk	
Information Governance	Reasonable	0	0	3	1	0%
Homelessness	Reasonable	0	0	2	7	22%
E- Payments	Comprehensive	0	0	0	2	0%
Creditors 2019-20	Comprehensive	0	0	0	4	0%
Medium Term Financial Plan	Reasonable	0	0	1	6	14%
Anti-Fraud & Corruption 2019-20	Reasonable	0	0	2	9	45%
Digital Transformation	Reasonable	0	0	4	2	0%
TOTALS		**0**	**0**	**12**	**31**	**19%**

Information Governance

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Council has taken sufficient action to be able to demonstrate compliance with the General Data Protection Regulations	14	11	3	0
The requirements in relation to the General Data Protection Regulations have become embedded and are being adhered to in practice across the Council.	4	1	2	1
TOTALS	**18**	**12**	**5**	**1**

Summary of Weakness	Risk Rating	Agreed Action Date
The Council had not reviewed and updated the policies within its IT Security Policy Framework to reflect GDPR legislation.	Low Risk	31/03/2020
Not all Council employees had undertaken the required GDPR e-learning training.	Moderate Risk	30/06/2020
Data Protection Impact Assessments had been completed but had not been subject to review or sign off by the Data Protection Officer, as per the Councils guidance.	Moderate Risk	30/06/2020

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Sensitive, personal data was being stored in locations which were not suitably restricted to only those officers with a genuine business need to access such information	Moderate Risk	30/06/2020

Homelessness

Assurance Rating

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
There are adequate operational procedures in place that ensure that the Council is complying with the Homelessness Reduction Act.	12	5	7	0
The Council ensures that the Personalised Housing Plans are being completed, that they are adequate, effective and actions are completed when required.	5	2	3	0
TOTALS	**17**	**7**	**10**	**0**

Summary of Weakness	Risk Rating	Agreed Action Date
The Housing Options section mainly operated using paper based files. Occasions had been noted where the paper file did not corresponded with the information in the H-CLIC system.	Low Risk	31/05/2020
Testing noted two occasions where the Council had not retained evidence of the documentation checked that demonstrated the applicant met the eligibility criteria regarding citizenship and residency and was therefore eligible for assistance.	Moderate Risk	30/06/2020
In one case, the Council was unable to provide evidence that they had checked that the applicant was threatened with homelessness within 56 days.	Low Risk	30/06/2020
There were minor differences in the description of the priority need categories between the Council's list of applicants with priority need to that documented in the Homelessness Code of Guidance for Local Authorities, provided by the Ministry of Housing, Communities & Local Government.	Low Risk	31/05/2020
The section in the H-CLIC system designed to show if a Personalised Housing Plan had been developed, communicated to and accepted by the applicant, had not been completed for 3 of the 17 applications tested.	Low Risk	30/06/2020
Decisions regarding applicant's vulnerability as part of their priority need criteria had not been documented.	Low Risk	30/06/2020
Testing noted one occasion where the Council had not evidenced that they had completed the actions noted in a Personalised Housing Plan.	Low Risk	30/06/2020

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Review of the Personalised Housing Plans found two plans which did not include any actions for the Council to undertake.	Moderate Risk	30/06/2020
The H-CLIC system was not being fully utilised to enable monitoring of actions completed from Personalised Housing Plans.	Low Risk	30/06/2020

E-Payments

Assurance Rating

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Income Management system upgrade is working as expected and there is an external control system around the new processes, including reconciliations, monitoring and reviews of the system.	7	6	0	1
Employees are encouraging/promoting the use of the online store.	2	0	2	0
The rental payments i.e. Markets collections and other collections, on mobile payment devices are working as required.	2	1	1	0
TOTALS	**11**	**7**	**3**	**1**

Summary of Weakness	Risk Rating	Agreed Action Date
Reconciliations of income records to the ledger were not being undertaken by all service areas in receipt of online payments.	Low Risk	31/08/2020
Access permissions to the Square Payments system were not appropriate for the duties assigned to an individual officer.	Low Risk	30/06/2020

Creditors 2019-20

Assurance Rating

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
To review and test the adequacy of creditors processes including supplier set up and changes, authorisations of ordering and invoices, and payment controls.	10	6	4	0

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To review the robustness of controls and procedures around the new intelligence scanning system currently being embedded.	3	3	0	0
TOTALS	**13**	**9**	**4**	**0**

Summary of Weakness	Risk Rating	Agreed Action Date
The procedure notes for creditor processing had not been updated following the Civica Financials upgrade.	Low Risk	30/09/2020
Testing of new creditor set ups identified one request which did not have supporting evidence retained on file.	Low Risk	31/05/2020
Procedural guidance documents did not clearly instruct officers to undertake and document the appropriate verification checks that should be undertaken prior to amending creditor bank details.	Low Risk	30/07/2020
Due to technical issues, the system control has been disabled that informs the officer raising the requisition where there is insufficient budget in place to cover their order.	Low Risk	30/09/2020

Medium Term Financial Plan

Assurance Rating

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Medium Term Financial Plan Accurately reflects the objectives set out in the Medium Term Financial Strategy.	7	3	4	0
The Medium Term Financial Plan has adequate controls and access is restricted to appropriate personnel.	2	0	2	0
The Medium Term Financial Plan reflects outcomes from assessments, for example, the CIPFA Financial Resilience Index.	2	2	0	0
The Medium Term Financial Plan has been effective in closing previous funding gaps and is a realistic plan for managing the Council's finances.	2	1	1	0
TOTALS	**13**	**6**	**7**	**0**

Summary of Weakness	Risk Rating	Agreed Action Date
A full and comprehensive Medium Term Financial Strategy had not been produced and approved by Members since October 2015.	Moderate Risk	28/02/2021
An updated Medium Term Financial Strategy report was not brought back to Members as recommended, following the closure and audit of the 2018/19 Accounts.	Low Risk	31/12/2020

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The Medium Term Financial Strategy Update, reported to Cabinet in February 2020, did not include sufficient information and clarity for Members and other stakeholders to fully understand the Council's financial position.	Low Risk	28/02/2021
A review of the Financial Plan and Strategy Update Cabinet report from February 2020 noted some typographical errors with the reported data.	Low Risk	31/05/2020
The Medium Term Financial Plan spreadsheet was being updated and amended without changes being checked by another officer.	Low Risk	30/11/2020
Access to the Medium Term Financial Plan spreadsheet was restricted to one officer which represents a single point of failure should that officer be unavailable.	Low Risk	30/11/2020
The Medium Term Financial Strategy Update (reported in Feb 2020) did not include estimates for Council Tax Income increases from growth and prudent estimated savings from the Digital Transformation Programme.	Low Risk	28/02/2021

Anti-Fraud & Corruption 2019-20

Assurance Rating

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Gifts & Hospitality Register is kept up to date and is operated within a clear policy.	7	2	4	1
The Council has effective anti-fraud measures in place within the Right to Buy process which deter and stop fraudulent applications from being made and processed; ensuring only legitimate and eligible tenants are successful with their Right to Buy application.	9	2	3	4
TOTALS	**16**	**4**	**7**	**5**

Summary of Weakness	Risk Rating	Agreed Action Date
The Council's current Member Code of Conduct does not comply with the latest recommendations on gifts and hospitality made in the report of the Committee of Standards in Public Life relating to Local Government Ethical Standards. The report recommends that a Local Authority Register of Gifts and Hospitality should include gifts and hospitality over £50 or totalling £100 per annum, from a single source. It also recommends that the Register is updated on a quarterly basis and published in an accessible form.	Low Risk	30/04/2021
The hyperlink on the Council's intranet to the Members Code of Conduct was incorrectly linked to a document called 'Guidance for Officers'.	Low Risk	Implemented

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Testing identified an Officer disclosure form which had not been approved by a relevant Manager. We also noted an Officer disclosure form and 5 Member disclosure forms which had been subject to a significant delay in the approval of those forms.	Low Risk	31/07/2020
One instance had been noted where the disclosure of a gift had been made by a Member nine months after its acceptance. Also, four employees had received hospitality but had not made a declaration and therefore had not had approval to attend the event. Additionally the forms did not require the disclosure of a date of the receipt of gift or hospitality and an approximate value.	Low Risk	31/07/2020
The spreadsheet used to confirm historical tenancy information had not been protected from editing and could be amended deliberately or erroneously to provide a tenant with discount that they had no entitlement to. It was also accessible to 14 employees who did not have a genuine business need to access the information.	Low Risk	Implemented
Credit checks were not completed as part of the initial checks on Right to Buy applicants.	Moderate Risk	31/08/2020
The Right to Buy assessment process did not include a visit to the applicant at the property to be purchased, to confirm that the tenant was actually living there.	Moderate Risk	31/12/2020
Only the current balance of the rent account of the property subject to the Right to Buy application would be checked. Historical balances on the rent account were not reviewed, therefore not identifying previous arrears, unusual transactions or changes to the account which could identify an ineligible applicant.	Low Risk	Implemented
The Council Tax and Housing Benefit accounts had not been reviewed to identify occupancy changes and arrears that could invalidate the Right to Buy application.	Low Risk	Implemented
Birth Certificates were accepted as proof of identification for Right to Buy applicants, where Photo Identification documents were not available.	Low Risk	Implemented
There were no documented alternative anti-money laundering checks in place for Right to Buy applicants who did not appoint a solicitor.	Low Risk	30/09/2020

Digital Transformation	

Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Council has robust controls over the purchase, maintenance and upgrade of business applications.	5	1	2	2

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The Council has up to date and legally binding contracts in place with providers of business applications.	2	0	0	2
TOTALS	**7**	**1**	**2**	**4**

Summary of Weakness	Risk Rating	Agreed Action Date
Budget holders within service areas have the ability to purchase and upgrade applications without consultation and approval from the Digital Services Transformation Board.	Moderate Risk	31/08/2020
There were no formally documented governance requirements for budget holders when purchasing new applications or upgrading existing applications.	Moderate Risk	31/08/2020
Some of the maintenance agreements for the applications in the audit sample did not include sufficient detail of what was included in the cost.	Low Risk	31/10/2020
The order and payment of annual maintenance costs for applications tested identified that some had not been checked back to the relevant contract details before authorisation, to ensure that the amount was correct.	Low Risk	31/10/2020
The Council did not have signed, up to date and adequate contracts in place for some of the applications tested.	Moderate Risk	31/10/2020
The contracts register did not include accurate detail for the applications reviewed as part of the audit.	Moderate Risk	31/10/2020

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RECOMMENDATION TRACKING

Final Report Date	Audit Assignments with Open Recommendations	Assurance Rating	Recommendations Open		
			Action Due	Being Implemented	Future Action
31-Oct-16	Main Accounting (MTFP)	Reasonable	0	1	0
11-Jan-18	Anti-Fraud & Corruption	Reasonable	0	1	0
27-Mar-18	Rent Arrears	Comprehensive	0	1	0
28-Mar-18	ECINS Security Assessment	Limited	0	3	0
24-Apr-18	ICT Performance Management	Reasonable	0	2	0
22-Jun-18	Health & Safety	Comprehensive	0	1	0
10-Jan-19	Depot Investigation	Limited	0	7	0
30-Jan-19	Licensing	Reasonable	0	1	0
14-Feb-19	Risk Registers	Reasonable	1	1	0
12-Mar-19	Treasury Management & Banking	Reasonable	0	1	0
16-Aug-19	Fire Safety	Reasonable	0	1	0
18-Sep-19	IT Policy Compliance	Limited	2	0	0
24-Sep-19	Door Access Control	Limited	0	3	0
09-Oct-19	Procurement 2019-20	Reasonable	0	3	0
29-Nov-19	Anti-Social Behaviour	Reasonable	5	0	0
29-Nov-19	Anti-Fraud 2018-19	N/A	0	2	0
03-Dec-19	Data Quality & Performance Management	Reasonable	0	4	0
31-Jan-20	Information Governance	Reasonable	0	4	0
16-Mar-20	Homelessness	Reasonable	0	7	0
18-Mar-20	E-Payments	Comprehensive	1	0	1
30-Apr-20	Creditors 2019-20	Comprehensive	1	0	3
27-May-20	Medium Term Financial Plan	Reasonable	0	0	6
08-Jul-20	Anti-Fraud & Corruption 2019-20	Reasonable	0	0	6
09-Jul-20	Digital Transformation	Reasonable	0	0	6
		TOTALS	**10**	**43**	**22**

Action Due = The agreed actions are due, but Internal Audit has been unable to ascertain any progress information from the responsible officer.

Being Implemented = The original action date has now passed and the agreed actions have yet to be completed. Internal Audit has obtained status update comments from the responsible officer and a revised action date.

Future Action = The agreed actions are not yet due, so Internal Audit has not followed the matter up.

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Audit Assignments with Recommendations Due	Action Due			Being Implemented		
	Significant Risk	Moderate Risk	Low Risk	Significant Risk	Moderate Risk	Low Risk
Risk Registers	0	0	1	0	1	0
Depot Investigation	0	0	0	0	4	3
Licensing	0	0	0	0	0	1
Rent Arrears	0	0	0	0	0	1
ICT Performance Management	0	0	0	0	2	0
Health & Safety	0	0	0	0	0	1
Anti-Fraud & Corruption	0	0	0	0	0	1
Fire Safety	0	0	0	0	1	0
ECINS Security Assessment	0	0	0	0	2	1
IT Policy Compliance	0	1	1	0	0	0
Main Accounting (MTFP)	0	0	0	0	0	1
Treasury Management & Banking Services	0	0	0	0	0	1
Data Quality & Performance Management	0	0	0	0	1	3
Anti-Social Behaviour	0	1	4	0	0	0
Procurement 2019-20	0	0	0	0	3	0
Anti-Fraud	0	0	0	0	2	0
Asset Management - Door Access	0	0	0	0	1	2
Information Governance	0	0	0	0	3	1
Homelessness	0	0	0	0	2	5
E-Payments	0	0	1	0	0	0
Creditors 2019-20	0	0	1	0	0	0
TOTALS	**0**	**2**	**8**	**0**	**22**	**21**

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Highlighted Recommendations

The following significant or moderate risk rated recommendations, that have not yet been implemented, are detailed for Committee's scrutiny.

Action Due

Anti-Social Behaviour	Rec No. 3
Summary of Weakness / Recommendation	Risk Rating
Insufficient case notes were documented, impacting on the ability of third parties to review the actions taken. We recommend that Management follow up the issue of new guidance by reviewing each officer's documentation and provide training if required.	Moderate Risk
Management Response/Action Details	Action Date
We acknowledge that case notes have been minimal at times with no Clear actions on next steps of the case. We acknowledge that some cases have not been changed to INACTIVE on ECINS and achieved when closed. ECINS best practice guide is now in place and is required to be followed by officers within the ASB Team. Process now implemented and will be included in the wider procedure manual which is in progress. Monthly audit in place but has not been fully completed.	31/12/2019
Status Update Comments	Revised Date

IT Policy Compliance	Rec No. 7
Summary of Weakness / Recommendation	Risk Rating
A significant amount of duplicate files were found across the S:\ drive (totalling over 150 GB of data), raising concerns around departments housekeeping, records management and filing structures. We recommend that management issues routine duplicate file reports to departmental managers and ensures departments are reminded of their responsibilities for establishing routine housekeeping, controlled filing structures and appropriate records management processes.	Moderate Risk
Management Response/Action Details	Action Date
We will go through a process of reminding managers of their responsibilities and investigate software options to provide duplicate file reports and implement if practical. We have recently implemented the new 'dedupe' facility on the main file server following its migration to a later operating system. This removes space taken up by identical blocks of data (rather than just looking at duplicate files) and freed up 400gb of space.	01/11/2019
Status Update Comments	Revised Date

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Being Implemented Recommendations

ECINS Security Assessment	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
There were no IP restrictions or two-factor authentication (2FA) process in place for Ashfield DC user access to the e-Cins system. We recommend that the Council raises a formal feature request for the introduction of 2-factor authentication in future releases of the system, or looks to restrict access to an authorised IP range. An acceptable usage policy should be defined for accessing the system outside the Council's private network.	Moderate Risk
Management Response/Action Details	Action Date
Police objected to this during early discussions with the Council and IT. To address these officers will be required to remote desk top into the Council's IT and access Ecins from here. Training and signing a MOU will ensure all officers understand the requirement moving forwards. To liaise with system provider to establish if there is an audit trail of IP address (these should all be one IP address).	30/06/2018
Status Update Comments	Revised Date
Ecins have stated that it can be done from the users action logs, however when tested this information was not available. The ECINS webpage whilst accessible to those that know the address is not accessible through any google search or similar. The PCC hold the contract with the service supplier and pay for the system on behalf of the County. There is a countywide Ecins meeting with the programme manager (appointed by the OPCC) as well as local meetings between ADC and the programme manager and all audit recommendations have been raised. With regards to two factor authentication, whilst recommended as best practice for remote access/Cloud systems TFA also presents draw back in terms of immediate access. Other organisations within the Notts programme have also raised the same issue but have accepted the risk in light of this fact and have instead chosen to focus on developing internal user policies that offer assurance around use of the system by staff to offset the risks. ADC will do the same and is working with Nottingham City Council, which is developing a set of conventions.	30/10/2019

ECINS Security Assessment	Rec No. 10
Summary of Weakness / Recommendation	Risk Rating
Current administrators of the system did not appear to have been sufficiently trained on the accessibility and whereabouts of security related reports that would need to be utilised for effective systems and security management. We recommend that management defines, documents and implements comprehensive security based training to all users granted organisation admin rights to allow them to effectively manage the security of the system and its users.	Moderate Risk
Management Response/Action Details	Action Date
This will be raised to the project lead (PCC office) as per audit recommendations for this to be included in training for persons with organisation admin rights. The Ecins lead for the Council will prepare documents with project lead for review and sign off.	30/09/2018
Status Update Comments	Revised Date
The PCC hold the contract with the service supplier and pay for the system on behalf of the County. There is a countywide Ecins meeting with the programme manager (appointed by the OPCC) as well as local meetings between ADC and the programme manager and all audit recommendations have been raised. ECINS does provide reporting that can highlight the volume of access by users in terms	30/10/2019

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of when it was last accessed, by who, how much data they have added to the system etc. It would be up to ADC to set regulations and conventions around what policies they would like to see enforced against this data, e.g. users who have not logged on for thirty days or more get access suspended. These functions are all available through the stats and lists function of ECINS.

Nottingham City Council are developing a number of guidelines/conventions and best practice approaches which upon completion will be shared across the programme. The Ecins Manager is happy to discuss at the next local delivery group what might be a good approach at ADC. The Ecins Manager is in the process of finalising an organisational best practice guide.

The training provided by the programme at present is basic user training reflecting the agreed usage conventions for the system across the county (now echoed across the east midlands). The idea for more advanced organisation admin training is a good one and something which the Ecins manager is looking into.

ICT Performance Management	Rec No. 1
Summary of Weakness / Recommendation	Risk Rating
Despite commitment to performance management in the Councils latest Technology Strategy, we could not find any documented performance management metrics and goals to support this. Similarly, performance metrics for IT did not appear to be subject to annual review, or agreed or monitored by the Council. We recommend that Management defines performance management metrics for the IT service, and implements policies and procedures for monitoring and reporting compliance. Metrics, goals and targets should also be subject to annual review.	Moderate Risk
Management Response/Action Details	Action Date
There is a review of the ICT Helpdesk due shortly where performance metrics will be defined and agreed.	01/09/2018
Status Update Comments	Revised Date
This action will fall in line with the new service desk application. Action on hold due to COVID-19.	30/09/2020

ICT Performance Management	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
Reviews of the team's performance in relation to the resolution of incidents and service requests did not appear to comply with a formal schedule, and evidence of previous reviews could not be provided as the actions/discussions were not documented in minutes. We recommend that Management defines a schedule for reviewing performance of incident and request resolution times, and ensures any agreed actions are documented in minutes which are retained.	Moderate Risk
Management Response/Action Details	Action Date
There is a review of the ICT Helpdesk due shortly where performance metrics will be defined and agreed.	01/09/2018
Status Update Comments	Revised Date
This action will fall in line with the new service desk application. Action on hold due to COVID-19.	30/09/2020

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Risk Registers	Rec No. 3
Summary of Weakness / Recommendation	Risk Rating
The Council had not formally considered and documented its risk appetite. We recommend that the Council formally assesses and documents its risk appetite as soon as practically possible. As a core consideration of the Council's risk management approach, formally documenting its risk appetite could help the Council to make informed decisions, achieve its goals and support sustainability. We recommend that the Council formally assesses and documents its risk appetite as soon as practically possible. As a core consideration of the Council's risk management approach, formally documenting its risk appetite could help the Council to make informed decisions, achieve its goals and support sustainability.	Moderate Risk
Management Response/Action Details	Action Date
Risk appetite has now been assessed for all corporate and service level risks and incorporated into reports. To continue this approach for Audit Committee reporting.	30/09/2019
Status Update Comments	Revised Date
The analysis of the risk appetite has been prepared on a service by service area basis. This was also completed for our corporate risks last October and now in place for all the service areas. Action date revised to January 2020 to allow time to consider whether the requirements set out in the strategy continue to meet the Council's needs.	31/01/2020

Depot Investigation	Rec No. 1
Summary of Weakness / Recommendation	Risk Rating
The Zeus time recording system was not being used fully and consistently across the Service. We recommend that Management ensure that employee time is recorded accurately, fully and consistently. Management should perform adequate checks to ensure time recording systems are being used as expected and hold staff to account where appropriate. Training should be given to staff where required and supported by procedural guidance notes.	Moderate Risk
Management Response/Action Details	Action Date
Review of time recording systems and policy. Training and reminder messages for managers and officers. Introduce spot checks.	30/09/2019
Status Update Comments	Revised Date
Policy has been reviewed and circulated to trade unions. Training is still to be finalised. Due to other commitments, deadline needs to be extended.	31/10/2020

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Depot Investigation	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
Management and staff were not always adhering to the Council's Leave Policy with meeting requests being used to request and approve leave. We recommend that Management ensure they are complying with the Councils Leave Policy and use the official process to authorise and record leave. After the year end, a sample of leave records should be examined by Management, independently of authorising Managers, to check for accuracy and review the appropriateness of records maintained.	Moderate Risk
Management Response/Action Details	Action Date
Review policy. Implementation of electronic leave request and approval system through MyView. Training and reminder messages for managers and officers. Introduce sample checks	01/04/2020
Status Update Comments	Revised Date
Policy has been reviewed and circulated to trade unions. Training is still to be undertaken. This has been put on hold due to retirement of the System Administrator and COVID-19.	30/09/2020

Depot Investigation	Rec No. 3
Summary of Weakness / Recommendation	Risk Rating
We were informed by the Investigating officer that the Transport Manager's Purchase card had been photocopied and was available for use, unsecured in the general office. We recommend that all Purchase Card holders are reminded of the corporate policy and their personal responsibilities in relation to holding a card. Management should take appropriate action where instances of misuse are found.	Moderate Risk
Management Response/Action Details	Action Date
Carry out a review of the policy and procedure and then roll out to officers through the provision of information and training.	31/10/2019
Status Update Comments	Revised Date
Policy to be reviewed and training/information provided to relevant Officers. Postponed due to COVID-19.	30/09/2020

Depot Investigation	Rec No. 4
Summary of Weakness / Recommendation	Risk Rating
There were variances between Directorates over the controls in place for the authorisation and the recording and retention of supporting information for Purchase card usage. We recommend that corporate guidance is provided to Card holders which detail how they should be authorising and recording card purchases and the requirements for supporting information retention. The use of Purchase cards should be subject to regular Management oversight.	Moderate Risk
Management Response/Action Details	Action Date
Carry out a review of the policy and procedure and then roll out to officers through the provision of information and training. The revised policy will include a process for ensuring management oversight.	31/10/2019
Status Update Comments	Revised Date
Due to other commitments, the deadline will need to be extended. Postponed due to	30/09/2020

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COVID-19.

Anti-Fraud	Rec No. 1
Summary of Weakness / Recommendation	Risk Rating
The Anti-fraud Sub-group had not met regularly for some months and the Baseline Assessment had not been completed. Therefore the review of the Council's anti-fraud measures could not be completed. We recommend that the Service Manager, Revenues & Benefits, resumes the Anti-fraud Sub-group meetings with a priority action to complete the Baseline Assessment. This will enable the group to compare the Council's anti-fraud activities with good practice in each service area and produce a development plan. Regular updates should then be provided to Management, the Anti-Fraud Group and the Audit Committee.	Moderate Risk
Management Response/Action Details	Action Date
Data-matching Sub-Group Meetings will resume and will report on its actions to the main Anti-Fraud Officer Working Group.	31/03/2020
Status Update Comments	Revised Date
Action on hold due to COVID-19.	30/09/2020

Anti-Fraud	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
The Council's use of the NFI and Data Matching exercises to identify fraud and error had been limited. We were unable to identify the Council's plans for further development in this area. We recommend that the Service Manager, Revenues & Benefits, evaluates the current NFI and Data Matching provision within the Council and explores results of the NFI and Data Matching exercises to determine which of the matches should be pursued and appropriately resourced. The Service Manager, Revenues & Benefits should also evaluate the suggested further actions in the Anti-fraud Review and make appropriate recommendations to the Anti-Fraud Group in order to develop and embed an anti-fraud culture within the Council.	Moderate Risk
Management Response/Action Details	Action Date
The Council is considering its current arrangements and will review these in light of best practice in order to develop an action plan designed to embed an anti-fraud culture within the Council including carrying out NFI and data matching exercises.	31/03/2020
Status Update Comments	Revised Date
Action on hold due to COVID-19.	30/09/2020

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Asset Management – Door Access	Rec No. 2
Summary of Weakness / Recommendation	**Risk Rating**

Inadequate processes were in place for the control and monitoring of temporary and visitor door access cards. We recommend that the processes for temporary and visitor door access cards are reviewed and appropriate controls are put in place for the issue and monitoring of these cards. We suggest that this includes the introduction of controls such as: • Temporary or visitor cards have a standard naming format such as Temp Kirkby1, Temp Kirkby2 and Temp Sutton1, Temp Sutton2, etc. • A definitive list should be developed and maintained of which officers have the ownership and responsibilities for which cards. • The Cards which are permanently enabled and provided to an individual to hand out are removed, and only allowed if a full business case is approved at Director Level and then manual record controls should be enforced and monitored on a regular basis. • Where the Council provide temporary cards held by individuals to hand to third parties, the use of the access cards and council buildings should form part of an agreement and the third parties should sign to confirm they will keep the cards secure and use them as agreed. Management should also obtain evidence that cards had been kept safely and manual records kept of usage. • Regular reconciliations from actual card stock to Paxton records should be completed to ensure records are correct and visitor and temporary cards have been returned as required.	Moderate Risk

Management Response/Action Details	**Action Date**
To introduce additional processes to ensure unused cards temporary/visitor cards are controlled and securely stored with set places in the Council, ensuring they can be more easily reconciled. Formal reconciliations will be completed. Instructions will be given to other areas responsible for issue of temporary card to complete formal reconciliations. Only permanent and temporary are issued.	31/12/2019

Status Update Comments	**Revised Date**
Procedures have been drafted to include processes for issuing temporary and visitor cards.	31/07/2020

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Procurement	Rec No. 1
Summary of Weakness / Recommendation	Risk Rating

There was no formal contract in place between the Council and the provider of procurement services.

We recommend that the Council produce a contract for the provision of procurement services as a matter of urgency. We would expect that the contract would be a comprehensive document that would include clauses covering:

- How the service is hosted
- Financial and other arrangements (e.g. VAT, use of council property, services)
- Governance arrangements
- Monitoring arrangements
- Right of access
- Third party assurance
- Issue Escalation/Dispute Resolution
- Break clauses
- Contingency arrangements
- Exit strategy

Risk Rating: Moderate Risk

Management Response/Action Details	Action Date
The contract is currently in Legal and being drafted. Delays have occurred due to unforeseen circumstances not related to the contract. This will require the approval of both sides and time must be allowed for negotiation and clarification.	31/03/2020

Status Update Comments	Revised Date
Revised contract still being considered by ADC and NCC Legal teams. Proposed contract was due to be presented to Cabinet on 30th June 2020 but was postponed to enable sufficient time to address COVID-19 related issues. To be ratified by Directors of Resources and Business Transformation and Legal and Governance.	31/10/2020

Procurement	Rec No. 3
Summary of Weakness / Recommendation	Risk Rating

The Contracts Register did not include all of the Council's contracts or all of the information required by the Local Government Transparency Code 2015. As such, it did not completely fulfil the purpose of a Contracts Register.

We recommend that the officer with designated responsibility for managing the Contracts Register carry out an exercise to ensure that it is a full and complete record of all contracts in place in the Council. We further recommend that the information included in the Contract Register is reviewed to ensure that it fully complies with the requirements of the Transparency Code.

Risk Rating: Moderate Risk

Management Response/Action Details	Action Date
Officers will review and determine an appropriate method for managing the Contracts Register moving forward, ensuring that all data required is published.	31/03/2020

Status Update Comments	Revised Date
Responsibility for overall corporate provision and updating of suitably robust contracts register has been realigned to be a responsibility of the Finance service following the departure of the Commercial Development Service Manager.	30/11/2020

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Procurement	Rec No. 4
Summary of Weakness / Recommendation	**Risk Rating**

The Council were not publishing the required data for the contracts where invitations to tender over the value of £5,000 had been raised in the previous quarter, as required by the Local Government Transparency Code 2015. We recommend that details of Invitations to Tender are separated from the Contracts Register and published in their own Register. This should be added to the Council's website as soon as is practically possible and updated quarterly. The following details should be recorded, as required by the Local Government Transparency Code 2015: • Reference number. • Title. • Description of goods and/or services sought. • Start date, end date and review dates. • Department responsible.	Moderate Risk

Management Response/Action Details	Action Date
Officers will review and determine an appropriate method for managing this information moving forward, ensuring that all data required is published.	31/03/2020

Status Update Comments	Revised Date
Responsibility for collating and publishing required contracts data has been realigned to be a responsibility of the Finance service following the departure of the Commercial Development Service Manager.	30/11/2020

Fire Safety	Rec No. 5
Summary of Weakness / Recommendation	**Risk Rating**

Not all entrance doors to flats comply with Fire Safety Regulations. We recommend that the Council reviews all flat entrance doors to identify those which do not comply with Fire Safety Regulations, or those that have failed recent government tests. The Council should then take action to ensure the appropriately accredited fire safety doors are installed at the entrances to all flats.	Moderate Risk

Management Response/Action Details	Action Date
An assessment of all flat entrance doors has been completed and the results forwarded to the Assets & Investment Section for building into future door replacement programme(s). However, due to uncertainties around the manufacture, testing, certification and subsequent affected supply of composite fire doors, it is currently not possible to identify a definitive timescale for completion. The option to use alternative timber fire doors of the appropriate fire safety standards and specification are currently being looked into.	31/03/2020

Status Update Comments	Revised Date
Assessments have been done, and project has been mobilised, however, due to restrictions on COVID-19 all major works have been postponed.	31/10/2020