



Ashfield District Council – Audit Progress Report

Audit Committee: 23 November 2023



Contents

Page

| | |
|-------------------------|---|
| AUDIT DASHBOARD | 3 |
| AUDIT PLAN | 4 |
| AUDIT COVERAGE | 5 |
| RECOMMENDATION TRACKING | 9 |

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.

Contacts

Richard Boneham CPFA
Head of Internal Audit (DCC) &
Head of Audit Partnership
c/o Derby City Council
Council House
Corporation Street
Derby, DE1 2FS
Tel. 01332 643280
richard.boneham@derby.gov.uk

Adrian Manifold CMIIA
Audit Manager
c/o Derby City Council
Council House
Corporation Street
Derby
DE1 2FS
Tel. 01332 643281
adrian.manifold@centralmidlandsaudit.co.uk

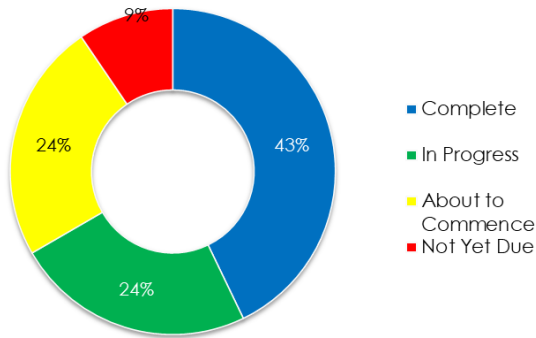
Mandy Marples CPFA, CCIP
Audit Manager
c/o Derby City Council
Council House
Corporation Street
Derby
DE1 2FS
Tel. 01332 643282
mandy.marples@centralmidlandsaudit.co.uk



Ashfield District Council – Audit Progress Report

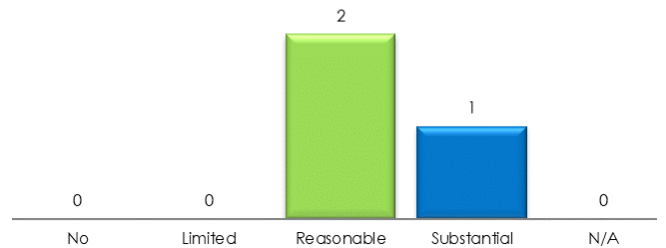
AUDIT DASHBOARD

Plan Progress



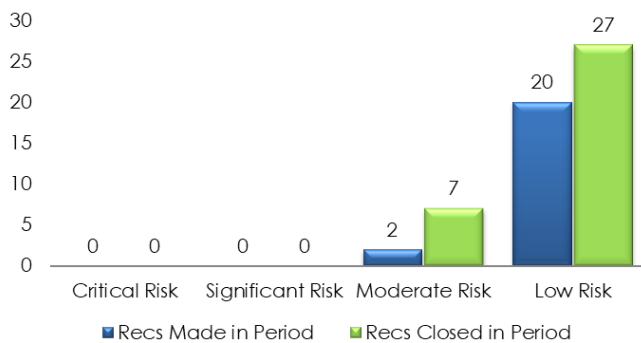
Assurance Ratings

Control Assurance Ratings Issued During Period



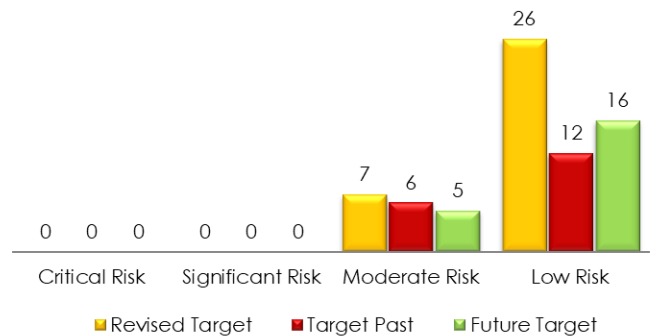
Recommendations

Movement During Period



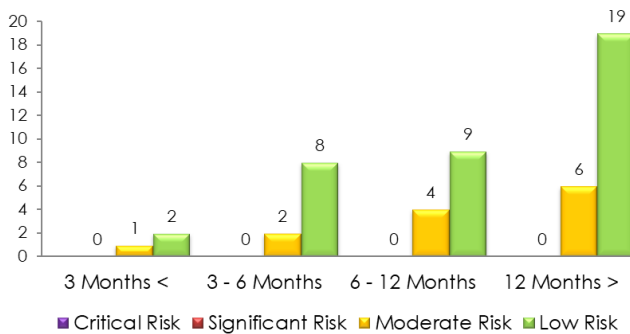
Recommendations

Recommendations Currently Open



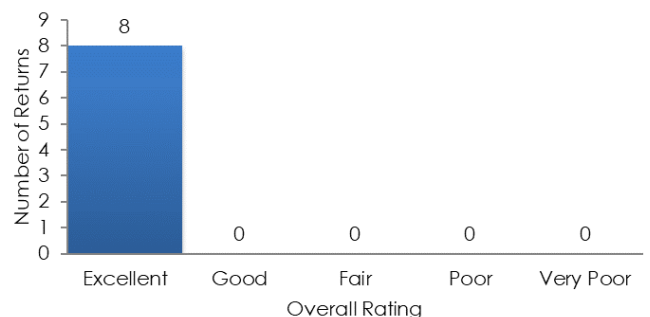
Recommendations

Overdue Recommendations



Customer Satisfaction

Returns Jan 2023 - Oct 2023



Ashfield District Council – Audit Progress Report

AUDIT PLAN

Progress on Audit Assignments

The following table provides the Committee with information on how audit assignments were progressing as of 6 November 2023.

| 2023-24 Jobs | Status | % Complete | Assurance Rating |
|--|---------------|------------|------------------|
| Member Code of Conduct & Officer/Member Protocol | In Progress | 60% | |
| Anti-Fraud & Corruption 2023-24 | Allocated | 5% | |
| Information Governance 2023-24 | Final Report | 100% | Reasonable |
| Audit Committee Effectiveness | Final Report | 100% | N/A |
| Finance System Implementation 2023-24 | In Progress | 30% | |
| Cyber Security & Entity Level Controls 2023-24 | Allocated | 15% | |
| Data Management 2023-24 | Not Allocated | 0% | |
| Commercial Investment Property 2023-24 | Allocated | 0% | |
| Contract Procedure Rules 2023-24 | Not Allocated | 0% | |
| Revenues Systems 2023-24 | In Progress | 60% | |
| Trade Waste 2023-24 | Allocated | 0% | |
| Pest Control 2023-24 | Allocated | 0% | |
| Markets 2023-24 | Draft Report | 95% | |
| Responsive Repairs 2023-24 | In Progress | 50% | |
| Health & Safety - Lifts | Final Report | 100% | Substantial |
| Outdoor Recreation - Equipment Safety 2023-24 | Final Report | 100% | Reasonable |
| B/Fwd Jobs | Status | % Complete | Assurance Rating |
| General Ledger - Data Analytics 2022-23 | Final Report | 100% | Reasonable |
| Estates 2022-23 | Final Report | 100% | Reasonable |
| Section 106 Agreements 2022-23 | Final Report | 100% | Substantial |
| Leisure Centre 2022-23 | Final Report | 100% | Reasonable |
| Future High Streets Fund 2022-23 | Final Report | 100% | Limited |

Audit Plan Changes

None to report.

Ashfield District Council – Audit Progress Report

AUDIT COVERAGE

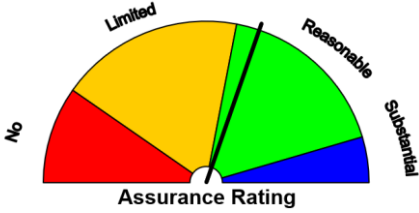
Completed Audit Assignments

Between 11 July 2023 and 6 November 2023, 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 | |
| Health & Safety - Lifts | Substantial | 0 | 0 | 0 | 3 | 67% |
| Information Governance 2023-24 | Reasonable | 0 | 0 | 2 | 10 | 42% |
| Outdoor Recreation – Equipment Safety | Reasonable | 0 | 0 | 0 | 7 | 0% |
| TOTALS | | 0 | 0 | 2 | 20 | 32% |

| Health & Safety Lifts | | | | | |
|--|--------------------|-------------------|--------------------|---------------|--|
| Control Objectives Examined | Controls Evaluated | Adequate Controls | Partial Controls | Weak Controls | |
| There are controls and processes in place for monitoring contract performance. | 8 | 6 | 2 | 0 | |
| TOTALS | 8 | 6 | 2 | 0 | |
| Summary of Weakness | | Risk Rating | Agreed Action Date | | |
| The Transport service area did not have a contract in place for the service and maintenance of refuse vehicle lifts. | | Low Risk | 30/09/2023 | | |
| The insurance inspection company did not have an up-to-date list of all the Stairlifts; this was evident by the number of wasted visits to properties where Stairlifts had been removed. | | Low Risk | 30/04/2023 | | |
| The implications for insurance inspections that were not undertaken were not fully understood by the Council, resulting in uncertainties as to whether insurance cover was invalidated. | | Low Risk | 30/04/2023 | | |

Ashfield District Council – Audit Progress Report

| <h2>Information Governance 2023-24</h2> |  <p>The Assurance Rating gauge is a semi-circle divided into four colored segments: a red segment labeled 'No', a yellow segment labeled 'Limited', a green segment labeled 'Reasonable', and a blue segment labeled 'Substantial'. A black needle points to the boundary between the 'Limited' and 'Reasonable' segments.</p> | | | |
|---|--|-------------------|--------------------|---------------|
| Control Objectives Examined | Controls Evaluated | Adequate Controls | Partial Controls | Weak Controls |
| The Council has processes and procedures in place to ensure that Freedom of Information requests are controlled and dealt with in accordance with the regulations. | 7 | 2 | 5 | 0 |
| The Council has processes and procedures in place to ensure that data protection is controlled, and regulations are adhered to. | 8 | 1 | 4 | 3 |
| TOTALS | 15 | 3 | 9 | 3 |
| Summary of Weakness | | Risk Rating | Agreed Action Date | |
| There was no internal procedural guidance on how to process and document Freedom of Information requests. | | Low Risk | Implemented | |
| Not all Freedom of Information contacts had attended training sessions offered and there was insufficient instruction to all other officers on the process to follow when receiving requests for information. | | Low Risk | 31/10/2023 | |
| The Council had not always responded to Freedom of Information requests in line with the 20-working day timeframe. This situation had been exacerbated by the recent implementation of the new case management system which required two records to be updated (a spreadsheet and the Case Management System), and on occasion by officers not pausing the request timeframe when clarifications were sought from the requester. At times the Freedom of Information records were incomplete or inaccurate and this had impacted on the ability to easily produce reliable statistical information for the Strategic Leadership Team. | | Low Risk | 31/12/2023 | |
| Testing noted one occasion where an officer who had completed an internal review of a Freedom of Information complaint had also been involved in the response to the original Freedom of Information request, and therefore could not be deemed to be independent. | | Low Risk | Implemented | |
| Testing highlighted that Freedom of Information supporting documentation was not always recorded in the Case Management System. There were also 2 occasions where the Freedom of Information contact in the appropriate service area had been notified of an incorrect deadline date. | | Low Risk | Implemented | |
| Review of employee file access permissions across a number of service areas noted occasions where access was not appropriate in SharePoint and shared drives. | | Moderate Risk | 31/12/2023 | |
| Review of the data protection policies and guidance has shown that the documentation has not been reviewed or updated since 2019. | | Low Risk | 31/12/2023 | |

Ashfield District Council – Audit Progress Report

| | | |
|--|---------------|-------------|
| There were some delays in updating the Subject Access Requests on the Case Management System and spreadsheet, and one occasion where the request for further time was submitted after the deadline date. The process of recording requests in two records (the spreadsheet and the Case Management System) is inefficient. | Low Risk | Implemented |
| The review of the Information Asset Register had not yet taken place and there were a number of differences between the Information Asset Register and the list of IT data systems within the Council. | Low Risk | 30/11/2023 |
| The system audits undertaken by the ICT service area had not been completed for a number of years. | Low Risk | 29/02/2024 |
| The Retention & Disposal Policy had not been reviewed since January 2018. | Low Risk | 30/11/2023 |
| The action plan for Freedom of Information and Data Protection did not include target dates for implementation of the actions and the action plan had not been included on the Council's performance monitoring software. | Moderate Risk | Implemented |

| | | | | |
|--|---------------------------|--------------------------|---------------------------|----------------------|
| Outdoor Recreation – Equipment Safety | | | | |
| Control Objectives Examined | Controls Evaluated | Adequate Controls | Partial Controls | Weak Controls |
| Appropriate controls are in place for ensuring playgrounds are adequately maintained and safe for use. | 17 | 8 | 5 | 4 |
| TOTALS | 17 | 8 | 5 | 4 |
| Summary of Weakness | | Risk Rating | Agreed Action Date | |
| The processes supporting the monitoring of inspections and repairs were not sufficient to ensure all inspections and repairs were managed and completed on a timely basis. In addition to this, the software in use was unapproved and Council data was stored on personal devices. | | Low Risk | 01/04/2024 | |
| The Environmental Service Team did not have an internal inventory of playground equipment from which to check the completeness of annual, routine and operational inspections. | | Low Risk | 01/04/2024 | |
| The frequency of planned inspections is not as recommended by the Royal Society for the Prevention of Accidents. The Environmental Service Team could not provide evidence of all the inspections requested for sampling. Where evidence of inspections was available, it only highlighted deficiencies and did not give assurance that all assets had been checked. | | Low Risk | 01/01/2024 | |

Ashfield District Council – Audit Progress Report

| | | |
|---|----------|------------|
| The annual independent inspection did not specifically state that playground surfaces were reviewed to the EN1177 impact absorbing playground surface standard. | Low Risk | 01/12/2023 |
| Council playgrounds and skateparks did not always display appropriate signage. | Low Risk | 01/02/2024 |
| The dog exclusion zones in Council parks did not correspond with the Public Spaces Protection Order 2021. | Low Risk | 01/04/2024 |
| The Environmental Services Team had not been provided with playground equipment product information, such as maintenance and service instructions, on hand over of a playground from the Regeneration Team. | Low Risk | 01/12/2023 |

Ashfield District Council – Audit Progress Report

RECOMMENDATION TRACKING

| Final Report Date | Audit Assignments with Open Recommendations | Assurance Rating | Recommendations Open | | |
|-------------------|---|------------------|----------------------|-------------------|---------------|
| | | | Action Due | Being Implemented | Future Action |
| 14-Feb-19 | Risk Registers | Reasonable | 0 | 1 | 0 |
| 16-Aug-19 | Fire Safety | Reasonable | 0 | 1 | 0 |
| 31-Jan-20 | Information Governance | Reasonable | 0 | 1 | 0 |
| 21-Jun-21 | Management of Fraud Risk | Limited | 0 | 9 | 0 |
| 10-May-21 | People Management | Reasonable | 0 | 4 | 0 |
| 21-Jun-21 | Delegated Decisions | Reasonable | 0 | 1 | 0 |
| 05-Oct-21 | PCI Compliance in Organisational Transformation | Reasonable | 0 | 1 | 0 |
| 28-Feb-22 | Outdoor Recreation - Sports Bookings | Limited | 0 | 4 | 0 |
| 08-Apr-22 | Accounting Systems 2021-22 | Substantial | 0 | 3 | 0 |
| 11-Jul-22 | Planning | Reasonable | 2 | 0 | 0 |
| 28-Jul-22 | Housing - Data Quality 2022-23 | No | 1 | 4 | 0 |
| 25-Oct-22 | Licensing 2022-23 | Reasonable | 0 | 3 | 0 |
| 23-Jan-23 | Health & Safety 2022-23 | Limited | 2 | 1 | 0 |
| 17-Apr-23 | Leisure Centre 2022-23 | Reasonable | 3 | 0 | 0 |
| 12-May-23 | Estates | Reasonable | 7 | 0 | 4 |
| 23-Jun-23 | Future High Streets Fund & Towns Fund | Limited | 1 | 0 | 1 |
| 06-Jul-23 | General Ledger - Data Analytics | Reasonable | 0 | 0 | 3 |
| 16-Aug-23 | Health & Safety - Lifts | Substantial | 1 | 0 | 0 |
| 16-Oct-23 | Information Governance 2023-24 | Reasonable | 1 | 0 | 6 |
| 19-Oct-23 | Outdoor Recreation - Equipment Safety | Reasonable | 0 | 0 | 7 |
| | | TOTALS | 18 | 33 | 21 |

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.

Ashfield District Council – Audit Progress Report

| 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 | 0 | 0 | 0 | 1 |
| Fire Safety | 0 | 0 | 0 | 0 | 1 | 0 |
| Information Governance | 0 | 0 | 0 | 0 | 1 | 0 |
| Management of Fraud Risk | 0 | 0 | 0 | 0 | 1 | 8 |
| People Management | 0 | 0 | 0 | 0 | 0 | 4 |
| Delegated Decisions | 0 | 0 | 0 | 0 | 0 | 1 |
| PCI Compliance in Organisational Transformation | 0 | 0 | 0 | 0 | 0 | 1 |
| Outdoor Recreation - Sports Bookings | 0 | 0 | 0 | 0 | 0 | 4 |
| Accounting Systems 2021-22 | 0 | 0 | 0 | 0 | 0 | 3 |
| Planning | 0 | 2 | 0 | 0 | 0 | 0 |
| Housing - Data Quality 2022-23 | 0 | 1 | 0 | 0 | 4 | 0 |
| Licensing 2022-23 | 0 | 0 | 0 | 0 | 0 | 3 |
| Health & Safety 2022-23 | 0 | 0 | 2 | 0 | 0 | 1 |
| Leisure Centre 2022-23 | 0 | 0 | 3 | 0 | 0 | 0 |
| Estates | 0 | 2 | 5 | 0 | 0 | 0 |
| Future High Streets Fund & Towns Fund | 0 | 1 | 0 | 0 | 0 | 0 |
| Health & Safety - Lifts | 0 | 0 | 1 | 0 | 0 | 0 |
| Information Governance 2023-24 | 0 | 0 | 1 | 0 | 0 | 0 |
| TOTALS | 0 | 6 | 12 | 0 | 7 | 26 |

Ashfield District Council – Audit Progress Report

Highlighted Recommendations

The following recommendations, that have not yet been implemented, are detailed for Committee's scrutiny.

Being Implemented Recommendations

| Information Governance | Rec No. 4 |
|---|---------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>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.</p> <p>We recommend that management take appropriate action to ensure that all personal, sensitive data is secured in files, within restrictive sub-folders, with access limited to only those officers who have a genuine business need to access such information.</p> | Moderate Risk |
| Management Response/Action Details | Action Date |
| <p>The IT Security Policy Framework is under review. As part of this review we will ensure it is updated to take account of GDPR requirements. Specifically, we will introduce the following measures to assist with ensuring access to data is suitably restricted to only those officers with a genuine business need to access such information:</p> <ul style="list-style-type: none"> - Starters/Transfers/Leavers E-Form – to be completed by the Section Manager. This form will identify access rights of starters, amendments for staff transferring internally and identify when staff leave the Council. This will be used in conjunction/cross-references with the report received from HR on a quarterly basis. - E-Form for completion by Managers/Directors for folder access changes. - Introduction of new file structure guidelines and cascade through ELT/ALT, DMTs and MOD. - Provision of Group Access Permission lists on a quarterly basis to Service Managers for checking and confirmation/amendment. IT to meet with individual Managers to confirm, amend and clarify what is required of Managers as part of this new process. | 30/06/2020 |
| Status Update Comments | Revised Date |
| <p>Actions have been taken to restrict folders and files.</p> <p>We are currently in the process of migrating documents to SharePoint/Teams which will introduce private channels. This will make it easier for managers to check who has access to the data held in them.</p> <p>Security Policy went live with all GDPR recommendations included. The Service Desk ask Line Managers for an employee that access rights for a new user can be based on. If no employee is given the employee will only get access to normal channels (for example section data). As part of this, the Service Desk also asks who the line manager is to ensure the Organisation chart is up to date. Evidence requested 4th Oct 2023.</p> | 30/06/2022 |

Ashfield District Council – Audit Progress Report

| Fire Safety | Rec No. 5 |
|--|----------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>Not all entrance doors to flats comply with Fire Safety Regulations.</p> <p>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.</p> | <p>Moderate Risk</p> |
| Management Response/Action Details | Action Date |
| <p>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.</p> | <p>31/03/2020</p> |
| Status Update Comments | Revised Date |
| <p>Standard fire doors (majority); installations to commence 07/02/22.</p> <p>The works are not yet complete. We have continued to have difficulties in terms of supply to source doors which comply with the regulations and at a fair price and meet other requirements. We have also had difficulty with closing strengths of doors (which stopped us from fitting Sherwood Court doors previously).</p> <p>We are making progress in terms of sourcing suppliers and our Contractor, J Tomlinson are hoping to fit the remaining doors as follows:-</p> <ul style="list-style-type: none"> • Leaseholder fire doors (Feb/March) • Sherwood Court doors (requiring additional works to the door heads and surrounds up to ceiling height (March/April) • Fire doors with sidelights (April/May). | <p>31/05/2023</p> |

| Management of Fraud Risk | Rec No. 6 |
|--|----------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>The Council did not have trained fraud investigators with professional accreditation to review and investigate all areas of potential fraud.</p> <p>We recommend that the Council ensure they have access to fully trained fraud investigators, who can be called upon to investigate any areas of suspected fraudulent activity.</p> | <p>Moderate Risk</p> |
| Management Response/Action Details | Action Date |
| <p>The Council will consider how to access a suitably trained fraud investigator.</p> | <p>30/04/2022</p> |
| Status Update Comments | Revised Date |
| <p>Action still being progressed.</p> | <p>31/03/2023</p> |

Ashfield District Council – Audit Progress Report

| Housing Data Quality 2022-23 | Rec No. 1 |
|---|---------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>Components were not automatically updated in the Capita Housing System following repairs and maintenance work tickets being completed. The manual process had led to instances of inaccuracy and inconsistency in the data sets maintained in the System.</p> <p>We recommend that all components are reviewed to ensure they show accurate data, and that the Council consider looking into an automated process so completed repairs and maintenance jobs directly update the component Masterfile within the Capita Housing System.</p> | Moderate Risk |
| Management Response/Action Details | Action Date |
| <p>Current component data to be extracted and cleansed.</p> <p>New Schedule of Rates (SOR) codes to be created to mirror components used.</p> <p>New Totalmobile (TM) forms to be created to enable direct/automatic upload from works completed on site into the Capita system.</p> <p>Creation of role to ensure Capita data is reconciled, accurate and relevant.</p> | 31/03/2023 |
| Status Update Comments | Revised Date |
| <p>Review and cleanse of Components and attribute data is complete and ongoing, as above.</p> <p>Surveyors now using Total Mobile to update components in OPEN while on site (stock condition surveys). Outside of this, Components should be updated by the repairs admin team – they have a process in place. Component Data has been reviewed and updated to ensure they are accurate.</p> <p>Some of this could be new functionality (automatically updating the component based on the SOW used) but the repairs team have been informed about how the system works and should be updating component data in OPEN.</p> <p>New career graded role has been created and added to establishment – now in recruitment.</p> | 30/06/2023 |

| Housing Data Quality 2022-23 | Rec No. 2 |
|--|---------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>Testing identified that windows component data was not always being updated, or updated completely and accurately, in the Capita Housing System following completion of routine planned maintenance works.</p> <p>We recommend that the Council put in place processes to ensure all planned maintenance works are updated accurately in the components on the Capita Housing System. The Council should consider developing an automated process so component data for completed planned maintenance works are directly updated within the Capita Housing System without the need for manual data entry.</p> | Moderate Risk |
| Management Response/Action Details | Action Date |
| <p>Current component data to be extracted and cleansed.</p> <p>Work undertaken by Major Works contractors is currently in the process of being automated with direct input to capita via SOR's.</p> <p>Creation of role to ensure Capita data is reconciled, accurate and relevant.</p> | 31/03/2023 |
| Status Update Comments | Revised Date |
| <p>Works completed by the contractor are being updated as part of the current repairs interfaces, however components still have to be updated manually.</p> | 30/06/2023 |

Ashfield District Council – Audit Progress Report

We can automate this so that the SOR updates the components automatically, however the team have been working on other priorities (i.e. correcting the component data).

We will speak to the repairs team to identify which component gets updated for each programme of works – then we can set the job (SOW) to update the component automatically on completion.

| Housing Data Quality 2022-23 | Rec No. 9 |
|---|------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>The personal and sensitive data stored in the Capita Housing System, may be out of date as it was obtained at the point of tenancy application and not refreshed thereafter.</p> <p>We recommend that the personal and sensitive data included in the Capita Housing System is reviewed to ensure it is accurate and up to date. Any personal and sensitive data not required should be deleted from the System.</p> | Moderate Risk |
| Management Response/Action Details | Action Date |
| <p>Data characteristics to enable accurate profiling to be determined.</p> <p>Current data to be extracted and cleansed.</p> <p>Rolling programme of collection and deletion to be established.</p> <p>Creation of role to ensure Capita data is reconciled, accurate and relevant.</p> | 31/03/2023 |
| Status Update Comments | Revised Date |
| <p>An action plan has been developed and approved by the Social Housing Regulation Team. Work has commenced on completing actions in the plan - evidence has been seen of monthly meetings taken place to monitor action plan. Some actions have slipped - And updates from section has shown that the project is still on track to be completed by the end of March 2024.</p> | 31/03/2024 |

| Housing Data Quality 2022-23 | Rec No. 10 |
|---|-------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>Access to the various Excel spreadsheets used to record component works such as checks, installations and replacements, had not been appropriately restricted.</p> <p>We recommend that management reviews the permissions on the folders storing the Excel spreadsheets that currently represent a master copy of component related works. Where possible, access to amend the data in the files should be significantly restricted, and other users where appropriate should only be given read only access permissions.</p> | Moderate Risk |
| Management Response/Action Details | Action Date |
| <p>All housing folders to be reviewed for permissions/restrictions NB needs to be measured against the move to SharePoint /Windows 365 as to the appropriate time to enact.</p> <p>IT to restrict access to housing specific folders (file holding areas) to a list of identified users, preferably belonging, and controlled by departmentally assigned Active Directory group(s).</p> | 31/10/2022 |
| Status Update Comments | Revised Date |
| <p>ICT have restructured Active Directory for the Housing section into its new layout. Groups have been created:</p> <ul style="list-style-type: none"> • Housing Operations • Assets and Investments | 30/11/2023 |

Ashfield District Council – Audit Progress Report

- Strategic Housing and Lettings
- Housing Management and Tenancy Services

ICT are now working through the folders on S: to further tighten down the permissions to folders where feasible.

Action Due

| Planning | Rec No. 2 |
|--|---------------|
| Summary of Weakness / Recommendation | Risk Rating |
| There were no processes in place that enabled management to monitor progress against tasks detailed on the Local Plan Work Programme. We recommend that management is provided with performance information, linking to the Local Plan Work Programme, from the Forward Planning Team on a regular basis. | Moderate Risk |
| Management Response/Action Details | Action Date |
| The team will be asked to provide a monthly report to the Assistant Director on a monthly basis. | 31/07/2022 |
| Status Update Comments | Revised Date |
| | |

| Planning | Rec No. 1 |
|---|---------------|
| Summary of Weakness / Recommendation | Risk Rating |
| There was a lack of audit trail regarding changes made to the Local Plan Work Programme and the status of tasks completed. We recommend that the Forward Planning Team ensure that there is an audit trail of changes to the Work Programme and the status of each task. The Work Programme should be updated regularly. | Moderate Risk |
| Management Response/Action Details | Action Date |
| This will be developed in the interim, but a key focus of the new team Manager will be project management of the work programme. | 31/10/2022 |
| Status Update Comments | Revised Date |
| | |

Ashfield District Council – Audit Progress Report

| Housing Data Quality 2022-23 | Rec No. 5 |
|--|----------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>Data Matching and testing identified that the smoke detector component fields within the Capita Housing System do not accurately reflect the true status of the smoke detectors in Council properties.</p> <p>We recommend that the smoke detector components are updated to ensure they accurately reflect the status of each smoke detector and that a process is developed to ensure they continue to be updated. This process should ensure data quality checks are performed to ensure accuracy and completeness of smoke detector component data maintained within the Capita Housing System.</p> | <p>Moderate Risk</p> |
| Management Response/Action Details | Action Date |
| <p>Current component data to be extracted and cleansed.</p> <p>System is already partly automated; however acceleration of the programme means that both in-house and contractors are installing alarms meaning the use of both TM for in-house and a data loader for contractor.</p> <p>Creation of role to ensure Capita data is reconciled, accurate and relevant.</p> | <p>30/11/2022</p> |
| Status Update Comments | Revised Date |
| | |

| Estates | Rec No. 2 |
|---|----------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>The use of an application form for commercial letting was not being enforced, and the form required updating as it referred to outdated data protection legislation.</p> <p>We recommend that the service area reviews and updates the application form to refer to the Data Protection Act 2018 and brings it back into use for all new tenancy applications.</p> | <p>Moderate Risk</p> |
| Management Response/Action Details | Action Date |
| <p>Agreed.</p> | <p>30/06/2023</p> |
| Status Update Comments | Revised Date |
| | |

| Estates | Rec No. 3 |
|--|----------------------|
| Summary of Weakness / Recommendation | Risk Rating |
| <p>Pre-tenancy checks did not include credit checks, identity checks or Companies House checks. Testing also noted 3 occasions where current pre-tenancy checks could not be evidenced.</p> <p>We recommend that pre-tenancy checks are improved, to include credit checks, identity checks and Companies House checks where possible. The same checks should be undertaken on all tenants and guarantors. All pre-tenancy checks should be evidenced.</p> | <p>Moderate Risk</p> |
| Management Response/Action Details | Action Date |
| <p>Agreed.</p> | <p>30/06/2023</p> |
| Status Update Comments | Revised Date |
| | |