A P central midlands audit partnership

Ashfield District Council – Audit Progress Report

Audit Committee: 29 February 2024





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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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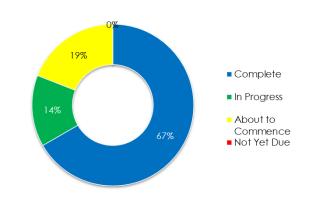
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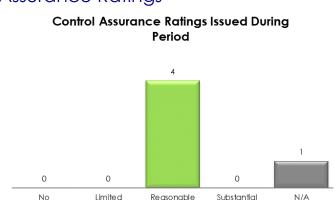
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AUDIT DASHBOARD

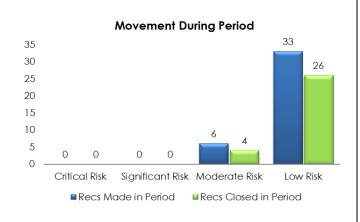
Plan Progress



Assurance Ratings



Recommendations



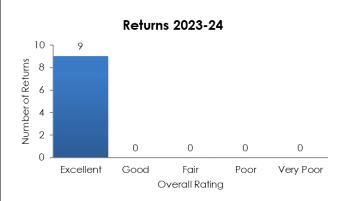
Recommendations



Recommendations



Customer Satisfaction



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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 of 14 February 2024.

2023-24 Jobs	Status	% Complete	Assurance Rating
Members Code of Conduct	Final Report	100%	Reasonable
Anti-Fraud & Corruption 2023-24	Final Report	100%	N/A
Information Governance 2023-24	Final Report	100%	Reasonable
Audit Committee Effectiveness	Final Report	100%	N/A
Finance System Implementation 2023-24	In Progress	50%	
Cyber Security & Entity Level Controls 2023-24	Allocated	15%	
Performance Management 2023-24	Allocated	5%	
Commercial Investment Property 2023-24	In Progress	70%	
Contract Procedure Rules 2023-24	Allocated	0%	
Revenues Systems 2023-24	Final Report	100%	Reasonable
Trade Waste 2023-24	In Progress	90%	
Pest Control 2023-24	Allocated	0%	
Markets 2023-24	Final Report	100%	Reasonable
Responsive Repairs 2023-24	Final Report	100%	Reasonable
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.

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AUDIT COVERAGE

Completed Audit Assignments

Between 7 November 2023 and 14 February 2024, the following audit assignments have been finalised since the last progress update was given to the Audit Committee.

Avalik Assimons and Commisted	A	F	% Recs				
Audit Assignments Completed in Period	Assurance Rating	Critical Risk	Significant Risk	Moderate Risk	Low Risk	Closed	
Markets 2023-24	Reasonable	0	0	2	7	56%	
Revenues Systems 2023-24	Reasonable	0	0	1	11	92%	
Members' Code of Conduct	Reasonable	0	0	1	10	0%	
Anti-fraud & Corruption 2023- 24	N/A	0	0	0	0	n/a	
Responsive Repairs 2023-24	Reasonable	0	0	2	5	43%	
TOTALS		0	0	6	33	49%	

Markets 2023-24	Assurance Rating				
Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls	
All traders are charged for the stall occupied and rental charges are periodically reviewed.	5	1	3	1	
Arrears are frequently monitored, and attempts are made to recover any outstanding monies.	10	7	3	0	
Traders' compliance with market terms and conditions is monitored.	5	2	2	1	
TOTALS	20	10	8	2	
Summary of Weakness	I	Risk Rating	Agreed A	Action Date	
The Council did not have a clearly defined and approved charging policy for documents fees chargeable and discounts allowed. This meant that not all charges for markets had been subject to annual review and approval. We concession that had been agreed verbally. The scheme of delegation in pl number of officers to individually review and amend, fees, charges, and lice markets, funfairs, and events where and when required.	Moderate Risk	α 31/0	01/2024		
There was no audit trail from the prepaid electric meter system for electric traders, to enable a reconciliation of payments received to issued electricity		Low Risk	31/	01/2024	

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Although traders were required to provide the Markets Retail Manager with updates when their billing records changed, there were no checks in place or requests for annual updates to confirm that the details held were correct.	Low Risk	31/03/2024
A market trader had been allowed to accumulate £6.8k worth of debt before formal action was taken.	Low Risk	31/01/2024
There were no reports issued to senior management responsible for the Markets Service that detailed the debts relating to markets.	Low Risk	31/01/2024
The reconciliation of income for outdoor markets had not been reviewed by an independent officer and did not ensure all income had been correctly coded on the ledger in detail.	Low Risk	31/01/2024
The traders at Idlewells indoor market were trading without signed licences.	Low Risk	31/03/2024
Market application forms contained outdated information regarding the outdoor markets available.	Low Risk	Implemented
The Markets office did not have current copies of all the market trader's public liability insurance documents to confirm that traders had an up-to-date policy in place, and for the correct value of insurance.	Moderate Risk	31/03/2024

Revenues System 2023-24



Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
Ensure that effective controls have been built into system transactions over the input of data in the Revenues system, to support data quality. Ensure supplementary exception reports have also been implemented to catch common data entry anomalies and errors.	12	2	0	10
Ensure the Revenues system and underlying server infrastructure have been configured in line with modern cyber security best practices.	14	6	0	8
TOTALS	26	8	0	18
Summary of Weakness		Risk Rating	Agreed A	Action Date
Several data quality issues were identified in a Council Tax data file provided, which may be indicative of flaws in up-front validation controls over the input of data in the Open		Low Risk	lmpl	emented

The Open Revenues system did not have standard error/exception reports available to allow the systems administrators to easily find the issues identified in the data quality checks.	Low Risk	Implemented
A data analytics exercise found that Council Tax accounts relating to unique individuals had been linked under the same PIN (person reference number) in error.	Low Risk	Implemented
13 Open Revenues users had unrestricted access to update their own records, or records to which they had a personal interest in, leaving opportunities for fraud and misuse.	Low Risk	20/12/2023
File level security for Civica e-Pay interface files that fed payment data into the Open Revenues system had not been properly restricted from unauthorised modification or deletion.	Low Risk	Implemented
A data analytics and matching exercise identified a small number of cases whereby supporting evidence was not readily available to support the award of an ongoing Class N exemption (full time students).	Low Risk	Implemented
11 accounts in the CONTROL access group (administrator level permissions) were vulnerable to unauthorised access as they had been configured with weak corresponding passwords. Furthermore, the security configuration of the Open Revenues system did not currently enforce minimum password length or complexity composition.	Low Risk	Implemented
Internal IT and 3rd party technical support from the software support company were using shared generic administrator accounts, which breached cyber security best practice.	Low Risk	Implemented
A vulnerability scan of all server-side components of the Open Revenues system, highlighted outdated and unsupported software components in operation that could not be patched by the internal IT department without impacting the system.	Low Risk	Implemented
Permissions on a file share (ibsapp) on the Open Revenues application and file server, granted unauthorised access to personal and sensitive information to approximately 200 users who did not have corresponding accounts in the Open Revenues system, and therefore did not have a genuine business need to access the information.	Moderate Risk	Implemented
Not all access to the S:\Revenues directory could be justified, breaching data protection principles.	Low Risk	01/03/2024
Generic 3rd party support accounts with no recent login activity for years, were members of the domain admins group, and therefore had complete administrative control over all server-side components of the Open Revenues system.	Low Risk	Implemented

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Members' Code of Conduct Assurance Rating Controls Adequate **Partial** Weak **Control Objectives Examined Evaluated** Controls **Controls** Controls The Members' Code of Conduct is in line with best practice and understood by Members. There is a robust process in operation for handling complaints against 2 10 4 4 Members. 5 2 2 An effective Standards Committee is in operation. 1 **TOTALS** 21 8 10 3 **Summary of Weakness Risk Rating Agreed Action Date** 31/12/2024 Some inconsistencies relating to disclosure of interests were identified in the Members' Low Risk Code of Conduct, when compared with the Local Government Association's Model Code of Conduct. Low Risk 31/12/2024 The Member/Officer Protocol had not been reviewed since 2015 and arrangements in place for Members contacting officers to request information were not clearly defined. Not all Members had completed mandatory induction training. Low Risk 30/04/2024 The gifts and hospitality register was not publicly available, and reports presented to the Low Risk 31/03/2024 Standards and Personnel Appeals Committee did not indicate whether gifts and hospitality were accepted or declined. Some aspects of the Member Complaints Process could be strengthened. Low Risk 31/12/2024 The Member Complaint form available on the Council's website required updating. Low Risk 31/12/2024 The progress of Member complaints was not adequately tracked or reported and there Moderate Risk 31/12/2024 was an insufficient audit trail to confirm that the Member Complaints Process had been followed. Low Risk There was only one Independent Person in post, which could impede progress of the 31/03/2024 Member complaint process should they not be available. Target timeframes for all stages of the Member Complaints Process were not set out. Low Risk 31/12/2024 Arrangements for instances where the Monitoring Officer has a conflict of interest were not Low Risk 31/12/2024 fully documented in the Member Complaints Process.

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The Annual Ethical Governance Update to the Standards and Personnel Appeals Committee provided only limited information on Member complaints.

Low Risk

31/03/2024

Anti-fraud & Corruption 2023-24

Assurance Rating - Not Applicable

The responsibility for the anti-fraud and corruption function has been realigned to the Corporate Resources Director. This realignment of function was designed to enable the Council to create greater operational resilience and improve capacity. The Council has recognised that it must continue to develop and embed its corporate approach to anti-fraud and corruption work.

We undertook a consultancy review to provide the Council with a position statement on their outstanding recommendations in this area, and to identify further areas of best practice where the Council could improve its fraud risk management framework.

Summary of Weakness

Anti-fraud, bribery and corruption training had not been delivered to all staff, and the Council did not have a plan for ensuring regular training would take place.

The Council's counter fraud roles and responsibilities had not been defined in accordance with the Counter Fraud Functional Standard.

The Council's Anti-Fraud and Corruption Strategy did not include all the key areas of best practice as set out within the Counter Fraud Functional Standard.

The Council did not have trained fraud investigators with professional accreditation to review and investigate all areas of potential fraud.

The Councils fraud risk assessments and therefore the fraud risk register was not broken down between high level risks and department/business unit risks, as advised by the Counter Fraud Functional Standard.

The Council had not yet defined outcomes for fraud detection activity and did not have in place metrics to measure the targeted outcomes.

The Council's Anti-Fraud and Corruption Strategy had not been reviewed in light of the additional fraud risks presented by the COVID-19 Pandemic, including changes in working practices.

The Council's Anti-Fraud and Corruption Strategy did not include information on the Council's approach to fraud risk assessment.

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The Council had made some progress in joining anti-fraud networks however they were still in the process of registering with the National Anti-Fraud Network.

There were 5 service areas which had not identified any fraud risks.

The proformas used to record decisions made did not included the requirement to assess fraud risk.

The Council's use of the NFI and Data Matching exercises to identify fraud and error had been limited, the data matching subgroup had not met, and also the terms of reference and work plan for the subgroup were at draft stage.

The Council's fraud response plan had not been updated since 2020, or tested, and the copy on the Council's website was an old version.

Fraud cases were recorded in various service areas around the Council and there was no case management system in place to ensure all suspected fraud and investigations were completed.

Responsive Repairs 2023-24



Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The system in place for processing requests and outcomes of works completed for responsive repairs is robust, including timescales of the appointments.	12	6	3	3
Customer satisfaction is adequately monitored and reported, including damp and mould complaints.	3	3	0	0
The process for computing jobs cost is robust.	4	3	1	0
TOTALS	19	12	4	3
Summary of Weakness		Risk Rating	Agreed A	Action Date

Summary of Weakness	Risk Rating	Agreed Action Date
The Council's website and tenant's handbook included out of date information regarding how to request a repair to a Council property.	Low Risk	01/04/2024
Incomplete pre-inspection jobs were not being monitored to ensure they had been actioned, and closed when not required.	Low Risk	Implemented

Start and end times and dates of repairs in the Capita housing system were not always accurate and complete.	Moderate Risk	Implemented
In our data download taken of repairs jobs from 1 June 2023 to 18 October 2023, there were 187 jobs in the Capita housing system which had not been completed or closed and were over 2 months old.	Low Risk	31/03/2024
The Optimise system had not yet been fully implemented to produce and monitor timesheets for the operatives.	Low Risk	31/07/2024
The Council were not comparing the allotted time for a repair to take place with the actual time taken to complete the repair job.	Moderate Risk	31/07/2024
Testing noted occasions where the material costs had not been updated accurately in the Schedule of Rates.	Low Risk	Implemented

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RECOMMENDATION TRACKING

Final Report	Audit Assignments with Open		Recommendations Open			
Date	Recommendations	Assurance Rating	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	
28-Jul-22	Housing - Data Quality 2022-23	No	0	5	0	
25-Oct-22	Licensing 2022-23	Reasonable	0	3	0	
23-Jan-23	Health & Safety 2022-23	Limited	0	1	0	
17-Apr-23	Leisure Centre 2022-23	Reasonable	0	1	0	
12-May-23	Estates	Reasonable	7	1	2	
23-Jun-23	Future High Streets Fund & Towns Fund	Limited	1	0	1	
06-Jul-23	General Ledger - Data Analytics	Reasonable	0	2	1	
16-Oct-23	Information Governance 2023-24	Reasonable	1	3	1	
19-Oct-23	Outdoor Recreation - Equipment Safety	Reasonable	2	0	4	
21-Nov-23	Markets 2023-24	Reasonable	0	3	1	
19-Dec-23	Revenues System 2023-24	Reasonable	0	0	1	
16-Jan-24	Members Code of Conduct	Reasonable	0	0	11	
26-Jan-24	Responsive Repairs 2023-24	Reasonable	0	0	4	
		TOTALS	11	44	26	

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.

	A	ction Due		Being	Implemente	d
Audit Assignments with Recommendations Due	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	2	7
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
Housing - Data Quality 2022-23	0	0	0	0	5	0
Licensing 2022-23	0	0	0	0	0	3
Health & Safety 2022-23	0	0	0	0	0	1
Leisure Centre 2022-23	0	0	0	0	0	1
Estates	0	2	5	0	0	1
Future High Streets Fund & Towns Fund	0	1	0	0	0	0
General Ledger Data Analytics	0	0	0	0	2	0
Information Governance 2023-24	0	1	0	0	0	3
Outdoor recreation – Equipment Safety	0	0	2	0	0	0
Markets 2023-24	0	0	0	0	1	2
TOTALS	0	4	7	0	12	32

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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
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
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.	
Management Response/Action Details	Action Date
 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: 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
Actions have been taken to restrict folders and files.	30/06/2022
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.	
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.	

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Fire Safety	Rec No. 5
Summary of Weakness / Recommendation	Risk Rating
Not all entrance doors to flats comply with Fire Safety Regulations.	Moderate
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.	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
Standard fire doors (majority); installations to commence 07/02/22.	31/03/2024
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).

We are making progress in terms of sourcing suppliers and our Contractor, J Tomlinson

- are hoping to fit the remaining doors as follows:
 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).

Nov 2023 Update - there have been numerous difficulties with implementing this recommendation, including issues with contractors. The Council should enter into a contract with a new contractor in the next couple of weeks, whose works will include completing the residual replacement fire doors. Circa 60 doors are still to be completed.

Management of Fraud Risk	Rec No. 6
Summary of Weakness / Recommendation	Risk Rating
The Council did not have trained fraud investigators with professional accreditation to review and investigate all areas of potential fraud.	Moderate Risk
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.	
Management Response/Action Details	Action Date
The Council will consider how to access a suitably trained fraud investigator.	30/04/2022
Status Update Comments	Revised Date
Action still being progressed.	31/03/2023

Management of Fraud Risk	Rec No. 10
Summary of Weakness / Recommendation	Risk Rating
The Council's fraud detection activities were limited, and they did not belong to any fraud groups nor were they a member of the National Anti-Fraud Network (NAFN).	Moderate Risk
We recommend that the Council consider the use of fraud networking groups, such as NAFN, and arrange further regular activities to detect fraud in high risk areas.	
Management Response/Action Details	Action Date
The Council will consider becoming a member of NAFN or other fraud networking groups.	31/10/2021
Status Update Comments	Revised Date
This is not yet complete. Application form was completed but a recent review of Anti- fraud practices has shown that the legal team were questioning the requirement to have this and have not completed the DPIA's, and had placed the application on hold.	30/06/2022

Housing Data Quality 2022-23	Rec No. 1
Summary of Weakness / Recommendation	Risk Rating
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.	Moderate Risk
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.	
Management Response/Action Details	Action Date
Current component data to be extracted and cleansed.	31/03/2023
New Schedule of Rates (SOR) codes to be created to mirror components used.	
New Totalmobile (TM) forms to be created to enable direct/automatic upload from works completed on site into the Capita system.	
Creation of role to ensure Capita data is reconciled, accurate and relevant.	
Status Update Comments	Revised Date
Review and cleanse of Components and attribute data is complete and ongoing, as above.	31/01/2024
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.	
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.	
New career graded role has been created and added to establishment – now in recruitment.	
Additional external consultancy resource has been added until Jan 2024 to assist with the refinement and creation of internal reports to aid in the management of this data.	

Housing Data Quality 2022-23	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
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.	Moderate Risk
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.	
Management Response/Action Details	Action Date
Current component data to be extracted and cleansed.	31/03/2023
Work undertaken by Major Works contractors is currently in the process of being automated with direct input to capita via SOR's.	
Creation of role to ensure Capita data is reconciled, accurate and relevant.	
Status Update Comments	Revised Date
Works completed by the contractor are being updated as part of the current repairs interfaces, however components still have to be updated manually.	31/01/2024
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.	
Additional external consultancy resource has been added until Jan 2024 to assist with the refinement and creation of internal reports to aid in the management of this data.	

Housing Data Quality 2022-23	Rec No. 9
Summary of Weakness / Recommendation	Risk Rating
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.	Moderate Risk
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.	
Management Response/Action Details	Action Date
Data characteristics to enable accurate profiling to be determined.	31/03/2023
Current data to be extracted and cleansed.	
Rolling programme of collection and deletion to be established.	
Creation of role to ensure Capita data is reconciled, accurate and relevant.	
Status Update Comments	Revised Date
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 therefore it is now forecasted that works will conclude before the end of Quarter 2 2024/25.	30/09/2024



Housing Data Quality 2022-23	Rec No. 10
Summary of Weakness / Recommendation	Risk Rating
Access to the various Excel spreadsheets used to record component works such as checks, installations and replacements, had not been appropriately restricted.	Moderate Risk
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.	
Management Response/Action Details	Action Date
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.	31/10/2022
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).	
Status Update Comments	Revised Date
ICT have restructured Active Directory for the Housing section into its new layout. Groups have been created:	30/11/2023
Housing Operations	
Assets and Investments	
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	

Housing Data Quality 2022-23	Rec No. 5
Summary of Weakness / Recommendation	Risk Rating
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.	Moderate Risk
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.	
Management Response/Action Details	Action Date
Current component data to be extracted and cleansed.	30/11/2022
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.	
Creation of role to ensure Capita data is reconciled, accurate and relevant.	
Status Update Comments	Revised Date
Additional external consultancy resource has been added until Jan 2024 to assist with the refinement and creation of internal reports to aid in the management of this data.	31/01/2024

Ashfield District Council – Audit Progress Report

Action Due

Future High Street Funds	Rec No. 9
Summary of Weakness / Recommendation	Risk Rating
Cabinet had not been informed of the risks to the Council should the projects and/or the programme fail.	Moderate Risk
We recommend the Council re-examine the risks specifically to the Council associated with the programme/project arrangements and put mitigating actions in place. This information should be reported to the Cabinet.	
Management Response/Action Details	Action Date
Noted, the risk was flagged at SLT and was being managed within the delegated authority and funds available. Noted this should be reflected in a Cabinet update.	31/10/2023
Status Update Comments	Revised Date

Estates	Rec No. 2
Summary of Weakness / Recommendation	Risk Rating
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.	Moderate Risk
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.	
Management Response/Action Details	Action Date
Agreed.	30/06/2023
Status Update Comments	Revised Date

Estates	Rec No. 3
Summary of Weakness / Recommendation	Risk Rating
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.	Moderate Risk
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.	
Management Response/Action Details	Action Date
Agreed.	30/06/2023
Status Update Comments	Revised Date