



INTERNAL AUDIT AND ANTI-FRAUD PROGRESS REPORT

London Borough of Southwark

For presentation to the Audit, Governance and Standards Committee

18 November 2020



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1. SUMMARY OF INTERNAL AUDIT WORK

Internal Audit

This report informs the Audit, Governance and Standards Committee of progress against the 2019-20 and 2020-21 internal audit plans. It summarises the work we have undertaken, together with our assessment of the systems reviewed and the recommendations we have raised. Our work complies with Public Sector Internal Audit Standards.

Internal audit methodology

We have agreed terms of reference for each piece of work with the risk owner, identifying the headline and sub-risks, which have been covered as part of the assignment. This approach is designed to enable us to give assurance on the risk management and internal control processes in place to mitigate the risks identified. Our reporting methodology is based on four assurance levels in respect of our overall conclusions as to the design and operational effectiveness of controls within the system reviewed - substantial, moderate, limited or no assurance. The four assurance levels are designed to ensure that the opinion given does not gravitate to a "satisfactory" or middle band grading. Under any system we are required to make a judgement when making our overall assessment. The definitions for our assurance levels are set out in appendix 1 to this report.

Internal audit plan 2019-20

As a result of Covid-19 and associated changing priorities, the Council was unable to provide the information to allow us to complete our work in respect of some audits. We have worked with the Council to now complete the remaining work at to at least draft report stage at the time of writing.

Where audit work was not started in 2019-20, the audits have been rolled forward and form part of the annual internal audit opinion for 2020-21.

Internal audit plan 2020-21

The internal audit plan for 2020-21 was resumed from 17 August 2020, it was previously suspended due to the Covid-19 pandemic and the Council's reprioritisation of activities and redeployment of staff. We have held discussions with Council departments to confirm the audits for 2020-21, and these are now resourced, with the majority of scoping meetings having taken place or scheduled. Due to Covid-19 and the late commencement of the plan, we will continue to complete audits to the end of April 2021.

In respect of the schools internal audit plan, we are to agree our approach with the Director of Education, with a view to recommencing audits remotely from January 2021.

We have provided assurance with regards to the Troubled Families grant, completing our audits for the period 1 April to 30 September 2020. No exceptions were identified. The next review will be in the period to 31 December 2020.

We also support the Council each month in the publication of its transparency data, by providing an independent check on the accuracy and completeness of reporting.

Audits that are in progress and their current status for 2019-20 and 2020-21 are summarised in section 3 of this report. Where reports have been finalised, the executive summaries are included in section 4.

Internal audit plan 2021-22

A draft plan will be presented to the Audit, Governance and Standards Committee at its meeting in February 2021, following discussions with Departmental Management Teams.

Follow up

As part of finalising each audit report, we agree with management the actions that will be taken in response to each finding and recommendation. Within their response, management include the date by which the actions will be completed. Internal audit routinely follows up all high and medium recommendations made ahead of each Audit, Governance and Standards Committee. A full schedule of recommendations falling due in the period is issued to each Departmental Management Team.

The implementation rate for previous recommendations has fallen from 81% to 76%. This is primarily due to the impact of Covid-19 but we will keep this under review, to ensure the Council is focusing on the higher priority recommendations.

2. ANTI-FRAUD UPDATE

BDO has been engaged to provide management support and strategic advice to the anti-fraud team at the Council. The lead for this work is Nick Baker (FCCA, ACFS), an accredited counter fraud senior manager and forensic accountant within BDO forensic services.

Summary of investigations 2019-20 to date

The figures below represent the team's investigations since 1 April 2019 for the period to 31 July 2020.

2020-21	Corporate Anti-Fraud		Housing Waiting List		Right to Buy		Covid 19 Referrals	
	Opened	Closed	Opened	Closed	Opened	Closed	Opened	Closed
C/f 2019/20	6		3		1		0	
April	19	13	6	15	2	3	7	6
May	9	8	4	3	3	0	11	6
June	4	5	6	3	1	4	4	2
July	10	8	8	4		2	9	2
August	8	6	4	1	4	2	5	2
September	15	10	1	1	1	3	3	2
October	21	20	4	3	3	1	0	2
Total	92	70	36	30	17	15	39	22

Active investigations

There are currently 39 active investigations being conducted by the Anti-fraud & Internal Audit Services. These can briefly be summarised as follows:

- Children & Adult Services - 9 Cases
- Housing & modernisation - 6 Cases
- Finance & Governance - 7 Cases
- COVID-19 - Business Grants - 9 Cases, Community Grants - 8 Cases

Of these 3 cases relate to former Council employees and 3 cases relate to a current Council employee. No further information in respect of these investigations can be given at this time.

Pro-active investigations

Currently any pro-active investigations are on hold given the ongoing Covid 19 Pandemic.

Once the current situation eases the Anti-fraud & Internal Audit Services will commence planned pro-active work on a number of areas within the Council's operations which are considered to be higher risk i.e. more likely to be subject to fraudulent activity.

In particular this will focus on areas such as COVID-19 Business Support grant payments as

well as the Community and Discretionary Grants, Procurement and council tax.

The areas will be identified via ongoing regular discussions with BDO Internal Audit and Risk Champions at the Council.

Update on fraud response policy

BDO remain in consultation with the Anti-fraud and Internal Audit Service to complete re-drafting and updating of the Council's Fraud Response Plan.

The purpose of this is to ensure that the Plan fully and transparently sets out in detail the Council's approach to identifying and dealing with potential fraud, the responsibilities of staff and the public in reporting suspicions of fraud, the approach the Council is committed to in investigating allegations of fraud, and the possible sanctions open to the Council when fraud is proven to have taken place.

Once completed it is currently envisaged this will be available to all staff and members of the public via a number of platforms.

In addition, the key points of the Plan will form part of updated intranet source material and also be used as part of updated and revised internal training.

Progress has of course been delayed by the current situation.

Grant update

Small Business Relief and Retail, Hospitality & Leisure Grant payments investigations appear to have slowed and this is assumed to be as a result of payments having ceased. The NFI 2020 exercise will provide additional data matching to identify high risk payments that will be further investigated when released in the New Year 2021.

Following a recent meeting following our participation in The Cabinet Office NFI Covid-19 Grant Payment Pilot, the number of Southwark investigations appear consistent with similar case numbers currently under review with the other nine participating councils. Further information will become available in due course.

Other business

Covid-19 has limited our ability to conduct interviews with witnesses and suspects in accordance with the Police and Criminal Evidence Act Codes of Conduct. The Anti-Fraud team will be looking at conducting virtual pace interviews and to this end will be participating in virtual interview training in early December 2020.

3. SUMMARY OF WORK IN PROGRESS

INTERNAL AUDIT PLAN 2019-20

The table below excludes 17 reports previously reported as final and included in our head of internal audit opinion (NB: the reports finalised in this period have no impact on our annual opinion for 2019-20). Where the audits are shaded in grey these have been finalised since the last meeting of the Audit, Governance and Standards Committee and the executive summaries are included in section 4.

Audit	Director / Audit Sponsor	Days	ToR issued	Fieldwork	QA / Reporting	Design	Operational Effectiveness
Parks	Director of Leisure	15	✓	✓	✓ Final report	Moderate	Moderate
Records Management	Strategic Director Finance and Governance	25	✓	✓	✓ Final report	Substantial	Moderate
Payroll and HR	Directors of Exchequer Services and Modernise	25	✓	✓	✓ Final report	NA	NA
Housing Rents	Director of Exchequer Services	10	✓	✓	✓ Final report	NA	NA
Payments to Children and Families	Director of Children's Social Care	22	✓	✓	✓ Updated draft report issued 26/03/20		
Foster Carers	Director of Children's Social Care	15	✓	✓	✓ Draft report issued 03/09/20		
Pensions Administration (Schools)	Director of Education Children's Services	15	✓	✓	✓ Draft report issued 04/09/20		
Tenancy Management Organisations - Fair Community Housing Services	Director of Communities	25	✓	✓	✓ Updated draft report issued 30/10/20		

Audit	Director / Audit Sponsor	Days	ToR issued	Fieldwork	QA / Reporting	Design	Operational Effectiveness
Tenancy Management Organisations - Falcon Point	Director of Communities	25	✓	✓	✓ Updated draft report issued 30/10/20		

INTERNAL AUDIT PLAN 2020-21

The table below includes the full plan for the year, where the audits are shaded in grey these have been finalised since the last meeting of the Audit, Governance and Standards Committee and the executive summaries are included in section 4.

Audit	Director / Audit Sponsor	Days	ToR issued	Fieldwork	QA / Reporting	Design	Operational Effectiveness
2020-21							
Tree Management	Strategic Director of Environment and Leisure	20	✓	✓	✓ Final report	Moderate	Limited
School Admissions	Director of Education	12	✓	✓	✓ Final Report	Substantial	Substantial
Customer Experience - Data Collection and Analysis	Director of Customer Experience	20	✓	✓	✓ Draft Report issued 13/07/20		
Community Infrastructure Levy	Director of Planning	15	✓	✓	✓ Draft Report issued 30/10/20		
Customer Experience and Complaints	Director of Customer Services	15	✓	✓	✓ Draft Report issued 05/11/20		

Audit	Director / Audit Sponsor	Days	ToR issued	Fieldwork	QA / Reporting	Design	Operational Effectiveness
Corporate Credit Cards	Strategic Director of Finance and Governance	15	✓	✓	✓ Draft Report issued 05/11/20		
Community Safety Partnerships	Director of Communities	15	✓	✓	✓ Draft Report issued 06/11/20		
Accounts Receivable and Debt Management (Environment and Leisure)	Directors of Exchequer, Environment and Leisure	15	✓	✓	✓ Draft Report issued 09/11/20		
Bankline	Strategic Director of Finance and Governance	15	✓	✓	✓ Draft Report issued 09/11/20		
Supported Accommodation - Family Hostels	Director of Resident Services	15	✓	✓	✓		
Adoption Service	Director of Childrens Social Care	15	✓	✓			
All Age Disability Service	Director of Adult Social Care	25	✓	✓			
Anti-facilitation of Tax Evasion	Strategic Director of Finance and Governance	15	✓	✓			
Bupa Overpayments	Strategic Directors of Finance and Governance, and Childrens' and Adults	15	✓	✓			
Climate Emergency Strategy	Strategic Director of Environment and Leisure	15	✓	✓			
Movement (Transport) Policy and Planning	Director of Transport	15	✓	✓			

Audit	Director / Audit Sponsor	Days	ToR issued	Fieldwork	QA / Reporting	Design	Operational Effectiveness
Substance Misuse	Director of Adult Social Care	15	✓	✓			
Supported Living	Director of Commissioning	15	✓	✓			
Contracts Register	Director of Law and Democracy	25	✓				
Demolition Process	Director of Customer Services	12	✓				
Housing Applications	Director of Customer Services	20	✓				
Litigation Protocols	Director of Law and Democracy	15	✓				
Management of Fairer Future Policy with Regards to Contracts	Strategic Director of Finance and Governance / COT / Corporate Governance Panel	25	✓				
SAP Scheme of Delegation and Authorisations	Director of Exchequer Services	15	✓				
Direct Payments	Director of Adult Social Care	15	Scoping discussion				
Fleet Contract and Strategy Management	Director of Environment	15	Scoping discussion				
IT - Cyber security	Director of Modernise	20	Scoping discussion				
IT - Mobile device management	Director of Modernise	20	Scoping discussion				
IT - Software Asset Management	Director of Modernise	20	Scoping discussion				
Pensions Administration	Strategic Director of Finance and Governance	15	Scoping discussion				

Audit	Director / Audit Sponsor	Days	ToR issued	Fieldwork	QA / Reporting	Design	Operational Effectiveness
South Dock Marina	Director of Leisure	12	Scoping discussion				
Travel Assistance	Director of Education	15	Scoping discussion				
Traded Services	Director of Education	25	Scoping discussion				

4. EXECUTIVE SUMMARIES OF REPORTS FINALISED SINCE THE LAST MEETING

CAS45 SCHOOLS ADMISSIONS October 2020	LEVEL OF ASSURANCE		SUMMARY OF RECOMMENDATIONS	
	Design	Operational effectiveness	High	-
	Substantial	Substantial	Medium	-
			Low	-
Purpose of audit	To review the Council's arrangements for ensuring that it complies with the Code of School Admissions.			
<p>Background:</p> <p>The School Admissions Code 2014 published by the Department for Education sets out the statutory guidance which must be followed by schools when carrying out duties relating to school admissions. The purpose of the code is to ensure that admissions are allocated in a fair and transparent manner. The School Admissions Code applies to both academies and local authority maintained schools, and includes guidance on the following, as well as an admissions timeline: admission arrangements, applications and offers, ensuring fairness and resolving issues and relevant legislation.</p> <p>In London there is a pan-London system; 33 boroughs coordinate admissions in line with the code and a process which is agreed each year. The Council allocates places for reception, year three, year seven, and year ten (for any University Technical Colleges). The joint agreement also outlines admissions criteria for community schools; all other schools where they are their own admissions authority, the admissions criteria is set by the school and must be in line with the School Admissions Code. The borough of Southwark currently has 34 primary level community schools, and (those that are their own admissions authority) 11 voluntary aided schools, nine academies, three foundation schools, and six free schools. The Council allocates places for schools where they are their own admissions authority, based on the school's defined admissions criteria. With regards to secondary schools, all are their own admissions authority and include three voluntary aided schools, 14 academies, and three free schools. There is also an in-year admissions process for pupils who move into the borough, where there is a duty to meet fair access criteria. The Council is required by the School Admissions Code to publish admissions criteria for every school in the borough, which is available on the Council's website by 1st September for the following school year.</p> <p>Key findings:</p> <ul style="list-style-type: none"> No recommendations were made. <p>Conclusion:</p> <p>The procedures and controls within this area are comprehensive and consistently applied. The Council has clear admission arrangements which are in line with the admission code. The admission arrangements are reviewed annually and the relevant consultations are held. The admissions criteria is published on the Council's website and also on the website of the community schools. The School admissions are made in line with the School Admission Code guidance. We were able to confirm that the risks in all the areas reviewed and through sample testing are being effectively managed.</p>				

EL16 PARKS October 2020		LEVEL OF ASSURANCE		SUMMARY OF RECOMMENDATIONS	
		Design	Operational effectiveness	High	-
		Moderate	Moderate	Medium	2
				Low	1
Purpose of audit	To review the policy framework, strategic framework, and finance and governance around the use of parks for events and generating commercial income through holding these events.				
Background:					
<p>The two primary methods of income generation through the use of parks comes through commercial event hires and filming. £160,000 of income is expected to be generated on an annual basis that can be put towards the Council's annual events programme. Outdoor events form an integral part of Southwark Council's cultural strategy, 'Creative Southwark'. In delivering the strategy, the Council manages over 160 outdoor events each year, which take place in its various parks, squares and streets. The Council's events team processes applications for these events, offers advice to event organisers, scrutinises event management plans, consults and engages with local stakeholders and partner agencies and monitors these events as they take place.</p> <p>The Council funds an annual programme of free community events such as Camberwell Fair, Bermondsey Carnival, East Dulwich Christmas Cracker, Peckham and Nunhead Free Film Festival and the annual firework display. The programme is approved through the Southwark Presents events programme put together by the culture service. This money is paid to external bodies who are responsible for arranging these events. The funding ranges from £5,000 to £80,000, with expected events funding being £136,000 for 2019/20. Due to the level of funding required for these events, the Council decided the outdoor events service should be self-funding through income generated from commercial events and filming. In 2018, the Council scheduled two major commercial events to take place. The outdoor events policy was updated in July 2019 to better reflect the intentions of the service and Council.</p> <p>Processing and management of the filming applications has been outsourced to a company called Film Fixer. The contract is due to expire on 31 January 2020 but this is currently out to tender. The expected value of the contract currently out to tender is £364k. We were advised that minimal filming takes place in parks and that filming primarily takes place in other, general areas around Southwark.</p>					
Good practice:					
<ul style="list-style-type: none"> Budget monitoring is undertaken on a monthly basis to reconcile actual and expected income received. Ongoing budget forecasting is also completed for the service area to effectively estimate expected income to be generated from events. Cabinet Members were provided with an update on the Events Business Plan in October 2019 and January 2020. We confirmed that the service's current financial position was reported against income targets as well as resources and actions required. At the end of the financial year to 31 March 2020 there was an overspend of £32,547 against the team's budget of £260,000. The income managed and outsourced to Film Flexer has been appropriately allocated by the Finance team. 					

Key findings:

- The Outdoor Events policy is unclear in a number of areas, for example what constitutes an event, circumstances where exemptions can be awarded and the level of exemption permitted.
- Our sample testing found a number of small errors in charges, stakeholders had not been notified of events and non-compliance with the current policy.

Conclusion:

Overall, we concluded moderate assurance over both the effectiveness and design of the controls in place. The exceptions we identified through the sample testing of events identified that the Outdoor Events policy and Event hire fees charges 2019/20 needs to be updated to reflect current practices.

Looking forward: supporting the Council's journey from moderate to substantial assurance

Design	<ul style="list-style-type: none">• Update the Outdoor Events Policy to ensure it is consistent with current practices• Update the Event hire fees and charges to state the values are excluding VAT as well as the maximum percentage of discretionary discounts that can be awarded.
Effectiveness	<ul style="list-style-type: none">• An independent check should be evidenced for discretionary discounts that have been awarded.• Staff should be reminded of the policies and correct charges that should be applied when assessing applications.• Spot checks on event applications should be undertaken.

TR15 RECORDS MANAGEMENT October 2020		LEVEL OF ASSURANCE		SUMMARY OF RECOMMENDATIONS	
		Design	Operational effectiveness	High	1
		Substantial	Moderate	Medium	-
				Low	-
Purpose of audit	Review the adequacy and effectiveness of the Council's controls and approach to its retention and disposal policies, and storage and retrieval of physical records held offsite.				
<p>Background:</p> <p>The Council receives, sends and holds a significant number of physical and digital records which are an important public asset and a key resource in the effective delivery of services. Effective management of records is crucial to smooth delivery of the Council's services. The Council has developed a governance guide for records management (electronic and physical) and plans are being put together to circulate this widely with relevant members of staff to raise awareness. This will supplement other policies and procedures already available.</p> <p>A corporate retention schedule is provided to the Council by one of its suppliers, Keith Batchelor, who also provides it to a number of other local authorities. The schedule provides guidance on different categories of records. There is scope to tailor this document based on needs (for instance where information about certain type of records is missing). To accomplish this, a change request form is completed and provided to the supplier who then updates the schedule with required information. Both the corporate retention schedule and change request forms are available on the Source, so that all staff can access them.</p> <p>The Council has stored its paper records offsite with Iron Mountain for the last ten years. Each file is assigned to a responsible person within each department. The Council has a record of all the files which are held off site so that these can be retrieved as and when required. There is a schedule highlighting a review/ destruction date for documents held by each of the departments which are to be destroyed accordingly.</p> <p>Good practice:</p> <ul style="list-style-type: none"> • The Council has a record management policy, which was approved by the Corporate Governance Panel in June 2018 and within its review date. The policy provides a framework for managing the Council's records and requires that departments put in place adequate records management procedures, including measures to ensure that working records containing personal information are fair, accurate, up-to-date and not excessive. • The Council has a record management good governance guide, which was developed by the Information Governance team in November 2019. The guidance maps out expectations for how records should be managed from a corporate perspective in line with national standards and regulator recommendations on best practice. The guidance provides details on seven distinct sections; governance, policies and procedures, access and indexing, sharing data, disposal, archiving and inactive record storage. • The Council has a detailed "Record Retention Schedule", which was last updated in September 2020, in line with the Acts of Parliament, Statutory Instruments and current business practices and applies to both physical and electronic records. The schedule specifies how long each type of record can be retained, and also when and how they should be disposed. The retention period specified applied to all formats of information held i.e. 					

paper, microfilm, and electronic (including emails).

- The Council maintains a comprehensive record of all files held off site. Departmental record managers have access to Iron Mountain (IM) Connect online portal which contains a list of all the boxes held at the offsite storage unit. From the sample testing of five areas, it was confirmed that comprehensive records were held and maintained in the form of manual spreadsheets as well as through monitored access of IM Connect online portal.
- Quarterly contract review meetings are held between the Council's contract manager and Iron Mountain which are minuted and record that the expected service is being delivered and records relating to Council documents are up to date and accurate

Key findings:

- The Council does not maintains a centrally held information asset register.
- A review of the individual departmental asset registers highlighted inconsistencies and key information was missing such as asset description, owner location, risk assessments, review date and retention period.
- Sample testing of ten departmental asset registers identified some inconsistencies, including:
 - Asset registers not reviewed since financial year 2018/19, and do not incorporate all the changes made to the Local Authority retention schedule.
 - Asset owners were unaware of the Council's record management policy or retention schedule
 - Age of the data kept not reviewed
 - Records not reviewed in last 12 months as required by the Council's policy

Annual reviews have not been conducted on electronic or paper records.

Conclusion:

The Council has a sound system of appropriate internal controls in place such as policies and Council-wide guidance, designed to achieve system objectives and to mitigate key risks. Whilst the control framework in place was reasonable, some exceptions were found in testing of the operational effectiveness of some procedures and controls, with evidence of non-compliance with some controls that may put some of the system objectives at risk. We have therefore concluded an opinion of substantial assurance for design and moderate assurance for operational effectiveness.

Looking forward: supporting the Council's journey from moderate to substantial assurance

Effectiveness	<ul style="list-style-type: none">• Management should conduct a thorough exercise to ensure all the Council's information assets are identified, with appropriate and specific information added to the asset registers.• A central asset inventory record is introduced which is reviewed annually.• Mapping of all information held needs to be completed and reported to the SMT.• Management should introduce a circulatory report on a regular basis, to identify departments that have not completed registers.
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	<ul style="list-style-type: none">• Management should ensure that the policy and retention schedule is appropriately communicated to all the asset owners• The asset owners should acknowledge and understand their responsibilities relating to record management and a formal record of this be kept.
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KFC05 PAYROLL AND HR October 2020	LEVEL OF ASSURANCE		SUMMARY OF RECOMMENDATIONS	
	Design	Operational effectiveness	High	-
	NA	NA	Medium	1
			Low	1
Purpose of audit	To provide assurance on the adequacy and operational effectiveness of the key controls in respect of payroll.			
<p>Background:</p> <p>Southwark Council processes the payroll for 4,600 staff each month. Within the Exchequer Services Division of the Finance and Governance Department, the council has a SAP Competency Centre, which includes the officers responsible for SAP HR and Payroll management and two payroll teams. Within the Modernise Division of the Housing and Modernisation Department, the council has a HR service, which includes the head of HR, HR Business Partnering, HR Policy and Projects and HR Customer Delivery which includes a new transactional team. Council managers work with the HR teams with regards to new starters/leavers/variations for the staff that they have line management responsibility. Transactions are managed via manager self-service (MSS) in SAP or through iCasework. Transactions are either processed to payroll via workflow or HR notifies the payroll team for the financial aspects of these changes to be reflected in the payroll system. The Council operates an employee self-service (ESS) system where processing/approval regarding sickness, annual leave, unpaid leave, overtime and expenses can be undertaken. If individuals cannot access the system then managers can do this on the individual's behalf. There are some services that are not on ESS such as Southwark Cleaning where managers issue payroll with excel documents of time to be compensated which is then processed and the management of productivity bonus payments in Southwark Building Services.</p> <p>Good practice:</p> <ul style="list-style-type: none"> We have confirmed through review of the governance, control frameworks and finance frameworks and sample testing of 35 exceptions highlighted during data analytics that any duplications of payroll standing data are due to operational requirements, such as multiple roles or living with another employee. There is a complete set of process maps for the SBS payroll process, a walkthrough of which is to be completed. <p>Key findings:</p> <ul style="list-style-type: none"> There was no root cause analysis completed on three overpayments made to staff when the notification was received by the HR transactions team. For three overpayments, the information recorded in the HR transactions team database was not correct based on the current position, and action had not been taken to recover the overpayment for at least two months. <p>Further testing outstanding:</p> <p>As a result of Covid-19 the Council has not been able to provide the information to allow us to complete our work. This was therefore an interim report and does not contain an assurance opinion but our audit to date has not suggested that the control environment has deteriorated. A full audit will be undertaken as part of the 2020-21 internal audit plan, and we will discuss with the Council how best to complete this in the current environment.</p>				

KFC03 HOUSING RENTS November 2020	LEVEL OF ASSURANCE		SUMMARY OF RECOMMENDATIONS	
	Design	Operational effectiveness	High	-
	NA	NA	Medium	2
			Low	2

Purpose of audit | To provide assurance on the adequacy and operational effectiveness of the key controls in respect of housing rents.

Background:

The council’s housing rents team collect approximately £182m in rent per annum from circa 35,000 properties. Of this, £120.6m is Universal Credit, with payments being made direct to claimants. Tenants may pay rents due by PayPal, rent card, bank transfer, standing order or direct debit. The pilot of the software ‘Rent Sense’ has been undertaken and will now reflect daily processing activities in order to improve efficiency. This has had a positive impact and is now part of the risk based approach to debt management, placing a greater emphasis on the customer experience and increased engagement to reduce the risk of payments being missed.

Good practice:

- Refunds of overpayments are paid correctly with an appropriate segregation of duties.
- Stock and finance reconciliations were completed on a monthly basis, however note the associated findings below.
- For the majority of accounts in arrears appropriate debt recovery action was taken.

Key findings:

- For two out of 25 accounts in arrears there was insufficient information on file to confirm what steps had been taken recently to recover the arrears.
- It was not possible to confirm who completed the monthly finance reconciliations and there was a small variance of £500 that was not resolved until year end.

Conclusion:

As a result of Covid-19 the Council has not been able to provide the information to allow us to complete our work for 2019-20. This report does not contain an assurance opinion but our audit to date has not suggested that the control environment has deteriorated. A full audit will be undertaken as part of the 2020-21 internal audit plan, and we will discuss with the Council how best to complete this in the current environment.

5. SUMMARY OF RECOMMENDATIONS STATUS

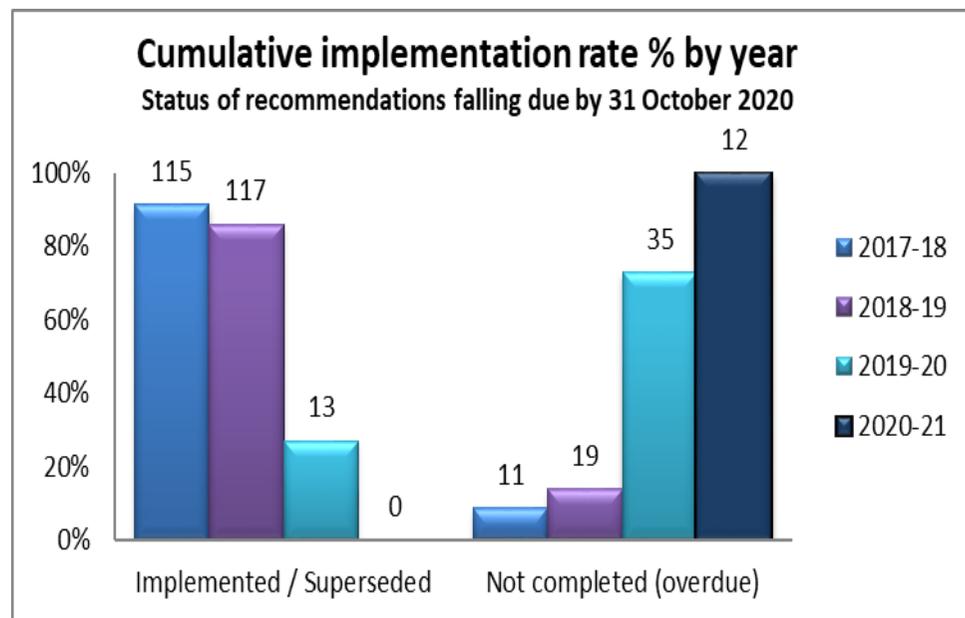
Of the 322 high and medium recommendations relating to 2017-18 to 2020-21 that have fallen due as at the end of October 2020, we have confirmed with reference to evidence that 245 have been fully implemented or superseded, representing 76%. The chart shows the relative percentages for each of the four years.

The implementation rate for previous recommendations has fallen from 81% to 76%. This is primarily due to the impact of Covid-19 but we will keep this under review, to ensure the Council is focusing on the higher priority recommendations.

The implementation status of each internal audit is summarised in the table overleaf. There were several audits for which an update was not provided by the date of reporting, which are indicated on the summary.

Please note:

- *The table does not include audits previously reported as completed.*
- *The table does not include audits that will be followed up as part of another audit during the year (for example in respect of key financial systems).*



RECOMMENDATION IMPLEMENTATION RATES BY AUDIT

Audit Area	Total High & Medium recommendations due for implementation	Implemented		In progress at the follow up date		Awaiting update, revised date or evidence		% verified complete	Management Implementation dates
		H	M	H	M	H	M		
Chief Executive's Department									
2017-18 Land Charges	5	-	2	1	2	-	-	40%	April 2019 December 2019 Awaiting update
2018-19 Business Continuity Planning	7	-	2	-	3	-	2	40%	July 2019 October 2019 January 2021
2019-20 S106 Agreements	3	-	-	-	-	-	3	Not due	January 2021
2020-21 Building Control	3	-	3	-	-	-	3	Not due	June 2021
2020-21 Records Management	1	1	-	-	-	-	-	Not due	March 2021
Children's and Adults Department									
2018-19 Commissioning	3	-	1	-	2	-	-	33%	November 2019 February 2020 Awaiting update
2019-20 Mental Health Services	3	-	-	-	-	2	1	0%	September 2020 Awaiting update
2019-20 Community Equipment	1	-	-	-	1	-	-	0%	October 2020 Awaiting evidence
2019-20 Mosaic (Learning Disabilities)	2	-	1	-	-	1	-	50%	September 2020 Awaiting update

Audit Area	Total High & Medium recommendations due for implementation	Implemented		In progress at the follow up date		Awaiting update, revised date or evidence		% verified complete	Management Implementation dates
		H	M	H	M	H	M		
2019-20 Appointeeships	3	-	3	-	-	-	3	0%	September 2020 Awaiting update
Environment and Leisure Department									
2019-20 Materials	3	-	-	-	3	-	-	0%	June 2020 Awaiting update
2019-20 Play Service	4	-	2	-	-	1	1	50%	November 2019 January 2021
2018-19 Public Health - Health in all policies	3	-	-	3	-	-	-	0%	April 2020 Awaiting evidence
2019-20 Volunteer Management	5	-	-	-	-	-	5	0%	June 2020 January 2021
2020-21 Trees Management	2	-	-	-	-	1	1	Not due	September 2020 December 2020
2020-21 Enforcement	3	-	-	-	2	-	1	0%	August 2020 January 2021
Finance and Governance Department									
2019-20 Barrister's Framework	3	-	2	-	-	-	1	67%	December 2019 Awaiting evidence
2019-20 Data and Information Management	1	-	-	-	1	-	-	0%	October 2020 Awaiting update
2019-20 Direct Debit Payments	2	-	-	-	-	1	1	0%	April 2020 Awaiting update
2019-20 Home Ownership - Garages	3	1	-	-	1	-	1	33%	April 2020 January 2021

Audit Area	Total High & Medium recommendations due for implementation	Implemented		In progress at the follow up date		Awaiting update, revised date or evidence		% verified complete	Management Implementation dates
		H	M	H	M	H	M		
Housing and Modernisation Department									
2017-18 IT - Disaster Recovery	5	1	2	2	-	-	-	60%	April 2019 June 2019 October 2019 May 2020 Awaiting evidence
2017-18 IT - Network Security	8	1	3	1	3	-	-	50%	December 2017 October 2018 June 2019 September 2020 April 2021
2018-19 Housing Solutions - Applications and Allocations	3	-	1	-	2	-	-	Not due	September 2019 January 2020 December 2020
2018-19 Temporary Accommodation	8	2	3	1	3	-	-	63%	April 2019 June 2019 November 2020
2019-20 Blue Badges	2	-	-	-	2	-	-	0%	April 2020 Awaiting evidence
2019-20 Homelessness	5	1	2	-	-	1	1	60%	May 2020 Awaiting evidence
2019-20 Shared ICT Service	1	-	-	-	-	-	1	Not due	February 2021
2020-21 Voids	1	-	1	-	1	-	-	0%	October 2020 Awaiting evidence
2020-21	2	-	2	-	-	-	-	Not due	April 2021

Audit Area	Total High & Medium recommendations due for implementation	Implemented		In progress at the follow up date		Awaiting update, revised date or evidence		% verified complete	Management Implementation dates
		H	M	H	M	H	M		
Parks									
Council Wide Reviews									
2018-19 IR35	3	-	-	-	-	-	3	Not due	January 2021

RECOMMENDATIONS NOT YET IMPLEMENTED

The tables below show the latest position with regards to the recommendations not yet implemented, where this has been provided. It excludes recommendations that have not fallen due.

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
Environment and Leisure Department		
2018-19 Public Health in All Policies		
<p>a) The public health team should review its roles to identify who would be the formal contact for each type of public health issue and communicate this within the council to ensure the correct contact is made first time.</p> <p>b) The role of the public health team and the benefits involved in using the expertise available to deliver theme 5 of the “fairer future promises, a healthier life” needs to be communicated council-wide. A series of presentations at the directors’ forum and departmental management teams would facilitate this.</p> <p>c) The public health team should work with departments to identify an appropriate representative to be the formal link to the public health team and to play a role as a champion to promote expertise and how it can be used in the department.</p> <p>Medium</p>	<p>Deputy Director of Public Health</p> <p>March 2020 August 2020</p>	<p>We were advised by the Director of Public Health that:</p> <p>a) This has been completed. There is an updated structure and contact details on the Source identifying lead names for different PH programmes</p> <p>b) This has been completed and is also ongoing. Presentations and updates are made as relevant to a range of forums, meetings, networks, displays and stalls in Tooley Street Atrium as well as in Council Depots on topics including health protection (Covid, screening, immunisation), health improvement (smoking, health weight), mental health and climate change and health. Tailored training has also been provided on mental health and online learning on healthy weight. Currently a staff course is being developed on covid19 and inequalities for My Learning Source.</p> <p>c) Individuals have been identified. The PH Team works closely with these individuals.</p> <p>We are awaiting evidence to confirm this.</p>
<p>a) A consistent set of guidance should be developed and communicated within the council to advise departments of the public health team’s role in the council and the knowledge and expertise of officers available.</p> <p>b) The Source page should be updated to reflect the team’s current status and the role it plays in the council with up to date contact details for enquires.</p>	<p>Deputy Director of Public Health</p> <p>December 2019 August 2020</p>	<p>We were advised by the Director of Public Health that:</p> <p>a) Public health priorities and strategies are available on the source with contact details to support joint working with departments.</p> <p>In addition to the information above and ongoing programmatic work with colleagues across the Council, the Source has also been updated with the recent PH Business Plan which sets out key programmes, structure and contact details</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
Medium		b)This has been updated with contact details We are awaiting evidence to confirm this.
<p>A means of assessing and monitoring the public health team's impact on local projects and in the communities within the borough should be developed.</p> <p>Medium</p>	<p>Deputy Director of Public Health</p> <p>March 2020</p> <p>August 2020</p>	<p>We were advised by the Director of Public Health that public health strategies and action plans are monitored at strategic partnerships which have oversight of key programmes, for example health checks, Smoking cessation, sexual health, food insecurity.</p> <p>The public health programmes align with key Council commitments in the Council Plan on for eg sexual health, smoking, health checks, food insecurity. Key PH priorities include to tackle poor air quality, healthy eating and physical activity inform and shape the Social Regen framework and charters.</p> <p>We are awaiting evidence to confirm this.</p>
2019-20 Volunteer Management		
<p>1) Undertake a review of the current Volunteering Strategy 2013-18 to bring this in line with the council's current strategic objectives and outcomes (corporate strategy). This could be a separate strategy or included in an existing strategy.</p> <p>2) Assign ownership to the council's overall volunteer programme.</p> <p>3) Introduce a single but flexible council wide volunteer policy that supports the strategy or a coordinated approach to volunteer management across the services for sharing of good practice.</p> <p>4) Produce a volunteer handbook or its incorporation in existing service handbooks.</p> <p>Medium</p>	<p>Community Engagement Manager</p> <p>End of June 2020</p> <p>January 2021</p>	<p>We were advised by the Community Engagement Manager that the Council has a strategy in place for 2018 into 2021. This will be reviewed early next year and the Community Engagement Team is currently discussing with Community Southwark the process for conducting the review with their external partners. COVID 19 has refocused on the value of volunteers and volunteering and this will need to be reflected in the new strategy.</p> <p>The Community Engagement Team have been working cross departmentally to develop a policy and a volunteer handbook that captures best practice so they are able to sign the charter which delivers consistency but is sufficiently flexible to take into account the range of functions that volunteers in the Council fulfil.</p> <p>It is anticipated that the policy and handbook will be presented to cabinet in December 2020.</p> <p>With over 400 volunteers annually it is not possible to assign single ownership for volunteers. The CE team will take responsibility for developing and updating the handbooks and policy and coordinate a staff network of volunteer managers.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>1) Include a vetting policy and the mechanism for volunteers across the council in the review of volunteer policies and procedures arrangements.</p> <p>2) Re-communicate to services the policy on renewal of DBS checks, use of Self Declaration Forms and DBS checking roles & responsibilities.</p> <p>3) Check records prior to the appointment of volunteers to specific activities to confirm that they are up to date with relevant employee information such as start dates and DBS check information.</p> <p>4) Clarify and communicate the arrangements on the use of previous offenders</p>	<p>Community Engagement Manager</p> <p>End of June 2020</p> <p>January 2021</p>	<p>Delays have been incurred due to the COVID-19 pandemic and the timeframe for implementation adjusted accordingly.</p> <p>We were advised by the Community Engagement Manager that the areas listed will be included in the policy.</p>
<p>1) Trading Standards (a) issue guidance on the retention of receipts and officer visit logs (b) introduce a requirement for volunteers to sign as received for gift vouchers & provision of meal receipts, (c) introduce an organised filing system for operational expenses and (d) undertake periodic (quarterly) reconciliation and review of gift voucher stock and test purchase operational expenses.</p> <p>2) Include volunteer expense reimbursement rules in the council wide volunteer policy.</p> <p>3) Approve the Regulatory Services credit card and adopt the same payment mechanism for payments by Culture & Events volunteers</p> <p>4) The Library & Heritage Service's expense claim procedure is finalised and documented for organisational reference and claims are paid as soon as possible.</p>	<p>Head of Culture and Head of Regulatory Services</p> <p>End of June 2020</p> <p>January 2021</p>	<p>Expenses reimbursement - libraries and events will implement the policy and procedures that will be introduced in corporate policy. To date this year due to Covid restrictions in service provision no volunteers have been used this year and we do not expect to use any throughout the rest of this year.</p> <p>There have been no further updates on this recommendation.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
Medium		
2020-21 Enforcement		
<p>Quarterly and end of year reconciliations should be completed to confirm the amount of expected income from FPNs and the amount actually paid and received. Reports should be generated from the APP database and SAP and reconciled to ensure that all expected income has been received. Where there are any variances these should be investigated and the outcomes detailed. This should be completed by an appropriate team leader or manager and signed off by the head of regulatory services. These should be held centrally in a digital format so they can be referred to.</p> <p>Medium</p>	<p>Team Leader/Unit Manager August 2020 January 2021</p>	<p>We were advised by the Unit Manager that they have the ability to produce and generate reports on APP. Quarterly meetings have now been agreed and diarised for reconciliations.</p> <p>The service has not yet been renewed. However, there is a meeting in place for January 2021 to address this.</p>
<p>A policy on whether or not to prosecute residents for unpaid FPNs should be agreed and on a quarterly basis, a report of open and unpaid FPNs should be generated. These should be reviewed by the manager and team leader and a decision formally made whether to prosecute. If the decision is to not prosecute then a record should be made of the decision and the FPN formally closed down.</p> <p>Medium</p>	<p>Team Leader/Unit Manager August 2020 January 2021</p>	<p>We were advised by the Unit Manager that quarterly meetings have been agreed and diarised to discuss and produce a report of open and unpaid FPNs.</p> <p>A record of decision will be made by each unpaid FPN which will be reviewed by Head of Service before being closed down or move towards prosecution.</p> <p>The service has not yet been renewed. However, the first meeting will be held in January 2021.</p>
Finance and Governance Department		
2019-20 Data and Information Management		
<p>Management should conduct a thorough exercise covering all systems, locations and business areas in order to fully record the types of data being created and retained and to ensure all information assets are</p>	<p>Business Manager of Building Services and Head of SEND services October 2020</p>	<p>We were advised by the Business and Finance Manager that they are in the process of implementing the recommendation for the SEND team.</p> <p>We are awaiting evidence to confirm this.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>identified, with appropriate and specific information added to the asset registers. An inventory record should be maintained which is reviewed annually.</p> <p>Medium</p>	<p>January 2021</p>	
Housing and Modernisation Department		
2017-18 IT Network Security		
<p>All devices that are running unsupported operating systems should be upgraded to operating systems that are supported by the developer. Where it is not possible to upgrade the operating system of a device, it must be isolated from the Council's IT network and appropriate security controls should be implemented.</p> <p>High</p>	<p>Enterprise Architect - IT Shared Services</p> <p>July 2017</p> <p>June 2019</p> <p>September 2020</p> <p>TBC</p> <p>April 2021</p>	<p>We were advised by the Enterprise Architect that the work to decommission Windows 2003 servers has started and expected to be completed within 6 months once data centre migration is complete and is due April 2021</p> <p>There are still 6 XP devices showing as active on the domain. There is an active project to try and replace them all.</p>
<p>Management should establish a complete record of the Council's firewall rules, which includes but is not limited to:</p> <ul style="list-style-type: none"> • The service that the firewall rule supports, including the owner of the service • Whether the rule allows for inbound, outbound or both connections • The expected levels of traffic for the rule. <p>Furthermore, a full review of the Council's internal and external firewall rules should be performed and, where necessary, insecure or redundant rules should be removed.</p> <p>Medium</p>	<p>Enterprise Architect - IT Shared Services</p> <p>July 2017</p> <p>June 2019</p> <p>September 2020</p> <p>TBC</p> <p>April 2021</p>	<p>We were advised by the Enterprise Architect that the work is in progress to migrate applications from Data Centre includes design and documentation of Firewall rules and as explained above this will be completed by April 2021.</p> <p>The network refresh work will cover remaining Firewall rules and plans have been made with timescales yet to be defined.</p> <p>A business case was raised to finance some work to carry out a review of all the firewall rules. As it would ideally need someone with experience of the firewall and the business to ensure that all the rules had a business reason and were documented appropriately. The shared service partners felt it should be carried out as part of BAU, this was then going to happen after the restructure within SICTS as put forward by Methods as part of their work reviewing the shared service.</p> <p>We are awaiting evidence to confirm this.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>The anti-malware signatures for all Council IT assets should be updated with the most recent antimalware signature. Devices that cannot be updated should be isolated from the Council's IT network. Furthermore, Capita should be required to provide assurance that the devices running the Microsoft Endpoint anti-malware solution have up to date anti-malware signatures.</p> <p>Medium</p>	<p>Enterprise Architect - IT Shared Services.</p> <p>October 2018</p> <p>September 2020</p> <p>TBC</p>	<p>We were advised by the Enterprise Architect that the Symantec is in place on the legacy environment and regular updates are sent out. In the new environment both laptop and Server SCEP is being used from Microsoft and regularly updated.</p> <p>We are awaiting evidence to confirm this.</p>
<p>Network activity should be baselined and proactively monitored in order to identify unusual or suspicious activity. This monitoring should include, but not be limited to:</p> <ul style="list-style-type: none"> • A record of the balance of network activity and external traffic • A record of all open and closed ports and where these have been changed • A record of standard network activity for any given time, which includes known peaks. <p>Furthermore, management should establish a programme to review the efficacy of the network security controls that have been deployed.</p> <p>Medium</p>	<p>Enterprise Architect - IT Shared Services.</p> <p>October 2017</p> <p>May 2019</p> <p>September 2020</p> <p>TBC</p>	<p>We were advised by the Enterprise Architect that all services in hosted Azure are centrally monitored using native Azure monitoring; Azure Monitor, Sentinel & Security Centre.</p> <p>Solarwinds is in place within the Brent and Croydon DCs and are used to keep track of the bandwidth used for inter site links.</p> <p>For more detailed monitoring and alerting there may be a need to purchase an appropriate fully compliant NIDS system. Which can fully baseline the network traffic and identify unusual or anomalous activity. Given the scale of the operation a solution similar to Darktrace may be appropriate.</p> <p>We are awaiting evidence to confirm this.</p>
<p>2018-19 Temporary Accommodation</p>		
<p>a) Management should have formal agreements with landlords and agents that state the standards expected by providers of private properties. The Council is currently in the process of deciding on a suitable property procurement framework in collaboration with the legal department (discussed in finding 8). The requirement for a formal agreement can be discussed</p>	<p>Overall - Manager, Housing Solutions Support - Procurement Officers, Placement Officers; Visiting officer, Resettlement officers, Reviews officers</p> <p>January 2019</p>	<p>We were advised by the Head of Housing Solutions that:</p> <p>a) The council has entered into the 'setting the standard' initiative.</p> <p>This will ensure that all nightly let properties are subject to inspections by new Pan-London inspection team. All Nightly Let providers are required to sign up to this new system.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>and the best course of action decided upon as part of any new procurement process. The Council then needs to determine a cost effective way of verifying the standards provided.</p> <p>b) Management should review the procedure for the incentive payments to landlords and ensure there is a formal policy and agreement with the providers regarding the Council's right to claw back payments. The criteria and recourse specifics for such action should be clear to landlords. Staff should also be informed to be able to implement the policy consistently. This can also form part of the current discussions regarding the procurement framework.</p> <p>High</p>	<p>July 2019 June 2020 TBC November 2020</p>	<p>Inspections are carried out prior to acquisition of some properties, particularly, those block booked in</p> <p>As a consequence of the Nightly Let reduction project (July 2019) all new PSL providers have been given overview of how the PSL scheme works and housing standards, customer care, incentives paid and that incentive are to be repaid should properties be returned.</p> <p>Training has been provided to Business Support officers on formula used to reclaim outstanding funds.</p> <p>This is monitored monthly and recorded on service dashboard.</p> <p>b) The incentives payment framework was reviewed locally within the service. This took into consideration the market forces and rates of other local authorities.</p> <p>The payments to Landlords are incentive payments which are refundable should we discontinue using the property. Incentives are only paid upon receipt of satisfactory documents and confirmation of the standard of the property.</p> <p>This matter is being led by the Finance Directorate and the corporate IT service. The Housing Solutions service will implement a system designed by these two separate teams once known.</p> <p>We are awaiting evidence to confirm all of the above.</p>
<p>a) Management should ensure that staff implement the payment controls in place, such as the daily register reconciliation with invoices received for nightly lets. There should be periodic reviews of the process by appropriately senior staff to confirm the control has been implemented consistently and a record of the review should be kept. Any instances identified where the control has not been implemented should be followed up with the staff member responsible.</p> <p>b) Management should also ensure that payment reconciliation of nightly lets are reviewed by the Business Support Manager before they are sent to</p>	<p>Business Support Manager January 2019 July 2019 October 2019 June 2020 TBC</p>	<p>We were advised by the Head of Housing Solutions that the responsibility of reviewing the PSL invoices is now distributed across the TA Business Support and Business Support Officers.</p> <p>The Supply Manager always copies in the TA Business Support officers when agreeing changes to rates or incentives. So that officers are able to reconcile invoices and updated rates are recorded on our systems.</p> <p>We are awaiting evidence to confirm this.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>finance for payment. A record of the review should be kept and senior management should periodically review the record to ensure the control is implemented. Any instances identified where the control has not been implemented should be followed up with the staff member responsible.</p> <p>c) The Business Support Manager should review the reconciliation of payments for private sector leases before they are sent to finance to ensure any unusual payments are identified and investigated. To manage the work load this control may bring about, the review can happen for amounts over a certain limit. A record of the review should be kept. The Procurement Manager should communicate any reviews they might have performed themselves to avoid duplication.</p> <p>d) Management should increase resilience of the service regarding the reconciliation of PSL payments, by ensuring that other members of staff are able to perform the reconciliation. The business support team, whose duties include the reconciliation of invoices to tenancy records, should be able to understand the process and perform the task when necessary for PSLs as well as for the nightly lets. The Procurement Assistant currently responsible should also create detailed guidance notes for the process.</p> <p>e) The reconciliation of invoices can be streamlined and made more efficient if providers are required to send their invoices on standard templates that will allow staff to quickly and easily identify the information they need. The prospect should be examined as part of the current rethinking of processes and procurement framework.</p> <p>Medium</p>		
<p>a) Management should ensure that a formal decision on the exemption from using the Contract Standing Orders</p>	<p>Business and Procurement Manager</p>	<p>We were advised by the Head of Housing Solutions that the update for this recommendation is as above, meetings have taken place with Legal.</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>is approved and recorded as well as the reasons for the exemption.</p> <p>b) They should also record any discussions, decisions and reasons for the frameworks to be used instead and any other ways they ensure value for money in the procurement of properties. Their meetings with the Legal team and Corporate Procurement should provide direction and advice on what is the best course of action around this issue.</p> <p>Medium</p>	<p>March 2019</p> <p>July 2019</p> <p>October 2019</p> <p>June 2020</p> <p>November 2020</p>	<p>TA Income and Corporate Procurement discussed options available to secure use of temporary accommodation. Further meetings to take place in November 2020.</p>
<p>2019-20 Blue Badges and Freedom Passes</p>		
<p>a) Where officers review documentation received by post, the case summary should confirm that this is the case where documentation is not scanned onto the system.</p> <p>b) Officers should be reminded to ensure all email correspondence and receipts are attached to iCasework. The process maps should be updated to remind officers to do this.</p> <p>c) As iCasework are not currently prepared to take action to resolve the system errors, a clear decision should be included within the case summary confirming whether an application has been approved or rejected. The council should consider escalating its concerns about the functionality of iCasework through its contract performance management arrangements.</p> <p>d) On a quarterly basis, a sample of applications should be checked by the accessible transport manager to ensure that the correct procedures are being followed.</p> <p>Medium</p>	<p>Accessible Transport Officer</p> <p>March 2020</p> <p>TBC</p>	<p>We were advised the Accessible Transport Officer that part a) and b) have been completed.</p> <p>We were advised the Accessible Transport Officer that part c) has been raised. However, as an upgrade for iCasework is being produced, it was suggested that this should be considered and raised when the new upgraded programme is implemented.</p> <p>We were advised by the Accessible Transport Officer that part d) has been completed and ongoing.</p> <p>We are awaiting evidence to confirm all of the above.</p>
<p>The information sharing schedule should be signed by</p>	<p>Accessible Transport Officer</p>	<p>We were advised by the Accessible Transport Officer that the information</p>

Recommendation and Priority Level	Manager Responsible & Due Date	Latest Implementation Status
<p>the council and a copy retained and provided to Able2.</p> <p>Medium</p>	<p>March 2020</p> <p>TBC</p>	<p>sharing schedule has been signed and completed.</p> <p>We are awaiting evidence to confirm this.</p>
<p>2019-20 Housing Solutions - Homelessness</p>		
<p>Should the contracts continue past the 31 March 2020, housing solutions should ensure that key contract clauses identified in the finding are incorporated in the signed contract and that performance targets are set and agreed by both parties in the Shelter and Solace agreements.</p> <p>Medium</p>	<p>Head of Housing Solutions and Housing Solution Manager</p> <p>Review in January 2020</p> <p>TBC</p>	<p>We were advised by the Head of Housing Solutions that a contract is now in place however, this contract may terminate due to the 2021/2022 budget challenges that may result in the partnership contract arrangements for 2021/2022 being terminated.</p> <p>We are awaiting evidence to confirm this.</p>
<p>A structured approach to business continuity including the development of a business continuity plan is put in place;</p> <p>This may include for example:</p> <ul style="list-style-type: none"> a. Use of Housing Solutions past experience in participating in pilot schemes to lobby government for more government funding; and b. Coordinate with other local authorities in securing more sources of permanent funding from central government. <p>High</p>	<p>Housing Solution Manager</p> <p>January 2020</p>	<p>We were advised by the Head of Housing Solutions that this has been completed, as evidenced during COVID19.</p> <p>We are awaiting evidence to confirm this.</p>
<p>2020-21 Voids</p>		
<p>The Voids Manager should liaise with the tell us once contact team with regards to updating their processes to ensure that RSOs are contacted to ensure that as soon as the property is available for works the voids team are notified.</p> <p>Medium</p>	<p>1 Voids Manager</p> <p>September 2020</p>	<p>We were advised by the Voids Manager that this recommendation has been completed.</p> <p>We are awaiting evidence to confirm this.</p>

APPENDIX 1

OPINION SIGNIFICANCE DEFINITION

Level of Assurance	Design Opinion	Findings from review	Effectiveness Opinion	Findings from review
Substantial 	Appropriate procedures and controls in place to mitigate the key risks.	There is a sound system of internal control designed to achieve system objectives.	No, or only minor, exceptions found in testing of the procedures and controls.	The controls that are in place are being consistently applied.
Moderate 	In the main, there are appropriate procedures and controls in place to mitigate the key risks reviewed albeit with some that are not fully effective.	Generally a sound system of internal control designed to achieve system objectives with some exceptions.	A small number of exceptions found in testing of the procedures and controls.	Evidence of non compliance with some controls, that may put some of the system objectives at risk.
Limited 	A number of significant gaps identified in the procedures and controls in key areas. Where practical, efforts should be made to address in-year.	System of internal controls is weakened with system objectives at risk of not being achieved.	A number of reoccurring exceptions found in testing of the procedures and controls. Where practical, efforts should be made to address in-year.	Non-compliance with key procedures and controls places the system objectives at risk.
No 	For all risk areas there are significant gaps in the procedures and controls. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Poor system of internal control.	Due to absence of effective controls and procedures, no reliance can be placed on their operation. Failure to address in-year affects the quality of the organisation's overall internal control framework.	Non compliance and/or compliance with inadequate controls.



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