

London Borough of Hammersmith and Fulham

Final Internal Audit Report

Engaging Support Workers through Agencies and  
Care Providers

August 2020



# ***Contents***

1	Introduction	3
2	Executive Summary	3
3	Summary of Findings	4
4	Acknowledgement	6
	Appendix 1: Management Action Plan	7
	Appendix 2: Definition of Assurance Opinions and Recommendation Priorities	13
	Appendix 3: Audit Scope, Limitations & Inherent Risks	14
	Appendix 4: Timetable and Distribution List	16

## 1 Introduction

As part of the internal audit plan for 2018/19, agreed by the Audit Pensions and Standards Committee, we have undertaken an internal audit of the Engagement of Support Workers through Agencies and Care Providers.

Support Workers are social care professionals who provide assistance and guidance to children and families in need. The duties of a Support Worker may vary based on the setting. The Workers are required to work alongside Social Workers to plan and provide the support a client needs, such as helping them improve their home management or parenting skills and providing emotional support.

The Support Worker role may also include:

- Supporting people with social and physical activities;
- Booking assistance or transporting people to appointments;
- Helping with personal care such as support with showering and dressing;
- Supporting people with eating and drinking;
- Monitoring individuals' conditions and possibly helping with medication.

Within the London Borough of Hammersmith and Fulham there is a small team of in-house Support Workers supplemented as needed through employment agencies and care providers. Commissioning of Support Workers is undertaken by the Council's Commissioning team.

## 2 Executive Summary

### 2.1 Assurance Opinion

	Nil	Limited	Satisfactory	Substantial
<b>Audit Opinion</b>				

### 2.2 Recommendations Summary

The following table highlights the number and categories of recommendations made.

Area of Scope	Adequacy	Effectiveness	Recommendations Raised		
			High	Medium	Low
Commissioning of Support Workers			1	2	0
Supervision and Performance Management			1	1	0
<b>Total</b>			<b>2</b>	<b>3</b>	<b>0</b>

Please refer to Appendix 1 for recommendations raised and Appendix 2 for a definition of the audit opinions and recommendation priorities.

### 3 Summary of Findings

In Internal Audit's opinion, **Limited Assurance** can be given to Members, the Chief Executive and other officers that the controls relied upon at the time of the audit were suitably designed, consistently applied and effective in their application.

We were unable to provide assurance in some of the areas due to us being unable to undertake any sample testing on case management due to the unavailability of officers to assist with our testing.

Subsequent to the fieldwork, no further testing was undertaken on Mosaic due to the Covid19 situation.

The key findings and an assessment of controls are summarised below:

#### **Application of and compliance with controls to address the key risks identified:**

##### **Commissioning of Support Workers**

- When a Support Worker is required, the Social Worker is required to complete a referral form detailing the support requirements for the client and any specific experience/qualifications of the Support Worker. The completed referral form must be approved by their manager prior to being submitted to the agency. For a sample of 20 cases where a Support Worker was required, the following was identified:
  - In 13 cases, a referral form was completed by a Social Worker and approved by their manager;
  - In four cases, the referral was made via email and a form was not completed. There was also no evidence of manager approval for these email referrals;
  - In three cases, there was no evidence of a referral form having been completed.
- As part of the referral form, the Social Worker identifies the type of briefing required for the Support Worker. For simple tasks, a briefing is not always required or a telephone briefing is undertaken. For more complex tasks, a face to face briefing may be required or a telephone briefing at the very least. For the 13 cases where a referral form was completed, in ten cases a briefing was requested and in three cases, a briefing was not requested. Where a briefing was requested, we were unable to confirm whether or not this briefing took place due to us not having access to Mosaic which is where this should be recorded.
- The recruitment agency used by the Council is Pertemps, for which there is a neutral vend contract in place. Pertemps are the managed service provider which means that the process is managed by Pertemps but filled by a number of agencies.
- Prior to an agency being used by Pertemps to source Support Workers, compliance checks are completed. Pertemps request an information form from the supplier which details their company information. Pertemps complete compliance checks to ensure the supplier meets the required levels detailed in their contract, for example, credit checks and insurance levels (Public liability, professional indemnity, employer's liability). Where the requirements are met, Pertemps issue a supplier agreement which must be signed and returned. These supplier agreements would be held with Pertemps and therefore we did not undertake any testing in this area.
- Agencies engaged to deliver personal care to disabled children should be registered with CQC. For the sample of 20 cases tested, in four cases we were able to confirm that the agency from which the Support Worker was provided was Carefirst as in these four cases the referral was made via email and the response to the email was from Carefirst. In one of these four cases, the request was for the provision of personal care. In the remaining 16 cases, we were unable to confirm the agency the Support worker was sourced from due to us not having

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access to Mosaic or Council officers. We were informed that the majority of Support Workers are provided by Carefirst and that Carefirst is not registered with CQC.

- Through discussion with the Service Development Officer we confirmed that each Support Worker is required to complete a basic level of training which is provided by the agency. Records of this training would be retained by the agency. For lower risk tasks, such as looking after children for a few hours or providing parenting support, Support Workers that are referred from Pertemps will be trained by a nurse or a qualified/experienced person. This training is provided for the Support Worker by the Council. For high risk tasks, such as supporting disabled/high needs children, then a support worker/nurse could be sourced from outside of the Pertemps contract to ensure that an appropriate carer can be provided. This could include additional requirements, such as, an appropriately qualified carer to undertake the duties and insurance cover which the provider is required to have.
- For each referral requested by the Social Worker, Pertemps will identify an appropriate Support Worker with the required qualifications/experience to meet the role's requirements. We were unable to undertake any testing in this area due to having no access to Mosaic, or officers to interrogate Mosaic on our behalf. Discussions with the Head of Service, Family Support and Child Protection (FSCP) and Service Manager Short Breaks indicated that the sourcing of Support Workers is not consistent across departments and that on some occasions the Support Workers have not been fully able to fulfil the duties required of them.
- The Pertemps Agency Workforce System (PAWS) is used to process orders for Support Workers. The request is reviewed by the PAWS support team to ensure that there is an authorised rationale for the requirement of a Support Worker. The order is then confirmed and released to the appropriate agencies. CVs of potential candidates are submitted on the PAWS system for the hiring manager to review. The hiring manager has the option to reject, request more information or organise interviews via the PAWS system.
- Once a candidate has been offered a placement, Pertemps will complete compliance checks and this is recorded on a checklist and sent to the hiring manager. Pertemps will request for all documentation to be uploaded onto the PAWS system to review and complete the checks prior to the candidate's start date. Where all documentation has not been uploaded prior to the start date, Pertemps will contact the hiring manager regarding options, such as a waiver or delay in start date. We were unable to undertake any testing in this area due to us not having no access to Mosaic or officers.

#### **Supervision and Performance Management**

- Once a Support Worker has been allocated to a client, it is the responsibility of the requesting Social Worker to monitor and review the performance of the Support Worker to confirm that they are undertaking the work required of them in an appropriate manner. However, there is no formal monitoring or review process in place and therefore there is limited assurance that the performance of a Support Worker is being monitored or reviewed.
- In order to manage allegations against professionals, the Council appoints a Local Authority Designated Officer (LADO). The LADO works within Children's Services and should be alerted to all cases in which it is alleged that a person who works with children has behaved in a way that has harmed or may have harmed a child; possibly committed a criminal offence against children, or related to a child; or behaves towards a child in a way that indicates they may pose a risk to children. Discussions with the Service Development Officer and the Commissioning Manager indicated that where concerns are raised by the client or their family in relation to the conduct of a Support Worker, then the Support Worker will be temporarily suspended and the case will be investigated. In more serious cases, where harm to a child is reported, a Section 47 assessment will be undertaken by the Local Authority. This was confirmed for one such case which was investigated in September 2018.
- Support Workers, provided by the agency, and Social Workers (Council officers) work together to deliver care packages. Where multiple Support Workers are required this may include organising timetables for when Support Workers are required to attend their clients to provide

the support. Support Workers complete timesheets which are signed by the client/family and then sent to both the agency and to the Council's Social Development Officer to confirm that the Support Worker attended the job and also to confirm that they were there for the required number of hours. On some occasions, the Support Worker will be requested to undertake unannounced visits to the client/family. In these instances, the timesheets would not be signed as the client/family may have refused to do so.

- The Head of Service FSCP and Service Manager Short Breaks stated that Care Packages are organised using the Mosaic System and that care packages over £500 should be approved by the Head of Department. Due to lack of cohesion between departments to provide this type of care which leads to departments operating differently, it is often difficult to manage cases and to monitor them. This may then lead to multiple Support Workers/carers attending the client/family at the same time.

## **4 Acknowledgement**

We would like to thank the following members of staff for their time and assistance during the audit:

- Hakeem Adelakun – Commissioning Service Development Officer
- John Mythen – Commissioning Manager for LAC and Placements
- Anna Keegan – Head of Service, Family Support and Child Protection (FSCP)
- Becky Powell – Service Manager Short Breaks

## Appendix 1: Management Action Plan

### 1. Referral Forms

Priority	Issue	Risk	Recommendation
Medium	<p>Referral forms are completed by Social Workers in order to obtain a suitable Support Worker for the child. The completed referral forms are approved by their manager prior to being submitted to the agency.</p> <p>For a sample of 20 cases where a Support Worker was required, the following exceptions were noted:</p> <ul style="list-style-type: none"> <li>In four cases, the referral was made via email and a form was not completed. There was also no evidence of manager approval for these email referrals; and</li> <li>In three cases, there was no evidence of a referral form having been completed.</li> </ul>	<p>Where referral forms for Support Workers are not completed or where there is no manager approval, there is an increased risk of unsuitable Support Workers being allocated. This could lead to potential harm to the child or the Support Worker. Accountability is also reduced where it is not clear who requested and approved the use of a Support Worker.</p>	<p>Where a Support Worker is required, Social Workers should ensure that a referral form is completed and approved by their manager. Support workers should not be sourced unless a form has been completed.</p> <p>Where a referral is made via email, the approved referral form should be attached to the email.</p> <p>Approved referral forms should be retained.</p>
Management Response			
<p>Agreed.</p> <ul style="list-style-type: none"> <li>We have agreed that all requests for a Family Support Worker will be made by completing a referral form</li> <li>The referral form will be approved by the manager.</li> <li>All referrals made by email will have the approved referral form attached.</li> <li>Work has begun to design a new standard referral form to use for agencies which identifies all the key information needed and includes appropriate sign off arrangements</li> <li>All referral forms will be upload to the child's case record.</li> </ul>			
Responsible Officer			Deadline
<p>Mandy Lawson – Assistant Director of Special Educational Needs Bev Sharpe – Assistant Director Family Services</p>			<p>1<sup>st</sup> September 2020</p>

## 2. Briefings for the Support Worker

Priority	Issue	Risk	Recommendation
Medium	As part of the referral form, the Social Worker identifies the type of briefing required for the Support Worker. For simple tasks, a briefing is not always required, or a telephone briefing is undertaken. For more complex tasks, a face to face briefing may be required or a telephone briefing at the very least. For the 13 cases, in ten cases a briefing was requested, but we were unable to confirm if a briefing took place. Ideally, briefings should be requested and held for all Support Workers and recorded.	Where Social Workers do not request or hold briefings with Support Workers, there is an increased risk of the Support Worker having insufficient information of the role they have been asked to undertake or any specific issues they need to be aware of.	Briefings with the Support Workers should always be requested and held prior to the Support Worker commencing their role with the client. Briefings should be recorded for future reference. Where a briefing is not required, then the reasons should be clearly recorded.
Management Response			
<p>Agreed.</p> <ul style="list-style-type: none"> <li>• Referrals to agency suppliers are made through the Pertemps system and the communication usually takes place with the agency supplier.</li> <li>• Pertemps will ensure compliance with DBS checks and provide CV's of potential Family Support Workers to confirm experience.</li> <li>• The referral form should be sufficiently detailed to clearly identify the work required.</li> <li>• The new referral form will form the basis of the briefing conversation with the agency worker/ manager.</li> <li>• Briefings between the social worker making the request and the support worker are helpful for assignments that maybe longer term, for short term emergency assignments this may not be practicable.</li> <li>• The briefing conversation notes will be added to the child's record</li> <li>• It is agreed that if briefings are not required that the reasons for this will be noted on the file.</li> <li>• This requirement will be circulated to all staff with the new procedure document and a one -minute guide and will be added to the agenda for discussion in team meetings to ensure all staff are aware of the agreed process.</li> </ul>			
Responsible Officer			Deadline
Mandy Lawson – Assistant Director of Special Educational Needs Bev Sharpe – Assistant Director Family Services			1 <sup>st</sup> September 2020

### 3. Sourcing of Support Workers

Priority	Issue	Risk	Recommendation
High	<p>Agencies engaged to deliver personal care to disabled children should be registered with CQC. For the sample of 20 cases tested, in four cases we were able to confirm that the agency from which the Support worker was provided was Carefirst as in these four cases the referral was made via email and the response to the email was from Carefirst. In one of these cases, the request was for the provision of personal care.</p> <p>We were informed that the majority of Support Workers are provided by Carefirst and Carefirst is not registered with CQC.</p> <p>For each referral requested by the Social Worker, Pertemps will identify an appropriate Support Worker with the required qualifications/experience to meet the role requirements. The Head of Service FSCP and Service Manager Short Breaks advised that the sourcing of Support Workers is not consistent across departments and that on some occasions the Support Workers had not been fully able to fulfil the duties required of them. The issues mainly originated from the identification of the need to the completion of referral forms where requirements would be detailed.</p>	<p>Where the agencies used to deliver personal care are not registered with CQC, there is an increased risk of inappropriate Support Workers being employed leading to reputational damage to the Council.</p> <p>Where the sourcing of Support Workers is not consistent across all departments, there is an increased risk of employing Support Workers who are not able to fulfil the duties required of them.</p>	<p>Agencies used to deliver personal care to children should be registered with CQC.</p> <p>The Council should obtain assurance from Pertemps to confirm that the agencies used are compliant with this requirement prior to Support Workers starting work.</p> <p>Management should ensure that the sourcing of support workers is consistent across departments by ensuring that referral forms are completed properly and correctly by including sufficient details of the requirements of the support workers.</p>

### Management Response

Agreed.

- The Special Educational Needs and Disability Service (SEND) has committed to not place any new children with personal care needs with unregistered agencies
- The SEND service has reviewed the few existing arrangements where unregistered agencies are engaged to ensure that there are no personal care needs performed and where that is a need, alternative arrangements have been put into place.
- Agency staff for short breaks packages are not arranged via Pertemps as Pertemps is a route to employ a named staff for a specific role, and for short breaks we require the agency to be responsible for delivering hours of support, which includes alternative cover if the usual worker is absent. We will use the new referral form being developed and briefing discussions to agree the expectations of agency staff whilst delivering support and agree supervision and review arrangements for each package of support purchased from an agency.
- We are in the process of registering our in-house community support service, so we anticipate reduced use of agency in the future
- We have agreed a consistent approach for the sourcing of support workers , with detailed referrals that clearly outline the service required.

### Responsible Officer

### Deadline

Mandy Lawson – Assistant Director of Special Educational Needs  
Bev Sharpe – Assistant Director Family Services

1<sup>st</sup> September 2020

#### 4. Monitoring Support Workers

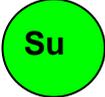
Priority	Issue	Risk	Recommendation
High	Once a Support Worker has been allocated to a client, it is the responsibility of the requesting Social Worker to monitor and review the performance of the Support Worker to confirm that they are undertaking the work required of them in an appropriate manner. However, there is no formal monitoring or review process in place and therefore there is reduced assurance that the performance of Support Workers is being monitored or reviewed.	Where there is no formal process in place to monitor and review the performance of Support Workers, there is an increased risk of poor performance or inappropriate practice issues not being identified and addressed.	Management should implement a formal process for monitoring and reviewing the performance of Support Workers. Social Workers should monitor and review the performance of all Support Workers they have allocated. Where issues are identified, appropriate action should be taken and used to determine whether the Support Worker should continue to be used in the current role and in future allocations.
Management Response			
<p>Agreed.</p> <ul style="list-style-type: none"> <li>The briefing discussion will set expectations and standards for the support provided by each agency as well as agree arrangements for supervision and review of the support.</li> <li>Any agency involved with a child and family will be asked to input to the child's assessment and regular reviews.</li> <li>Following briefing discussions, any issues or concerns will be addressed.</li> <li>Social workers will be in regular communication with support workers to establish the impact of the support workers intervention with a family,</li> <li>Family Support Workers must provide information to the social worker about any new risks or concerns that are identified during the assignment.</li> <li>If there are concerns about a Family Support Workers performance or ability to meet the agreed requirements of the assignment these should be discussed with the social workers line manager ,and a decision made about whether to continue with that worker having addressed the issues , or to end the assignment.</li> </ul>			
Responsible Officer			Deadline
Mandy Lawson – Assistant Director of Special Educational Needs Bev Sharpe – Assistant Director Family Services			1 <sup>st</sup> September 2020

## 5. Coordination of Care Packages

Priority	Issue	Risk	Recommendation
Medium	Care Packages are organised through the Mosaic System and can involve a number of different Child and Family Care Services, including Support Workers. We were advised that, due to a lack of cohesion between departments and Support Workers to provide this type of care, it is often difficult to manage cases and to monitor them. This may then lead to multiple Support Workers/carers attending the client/family at the same time or a lack of continuity and cohesion in the way support is provided and managed.	Where there is lack of cohesion between services and where the work of Support Workers is not coordinated with other services involved in the care and support of clients, there is an increased risk of an inappropriate care package being organised which may not effectively meet the needs of the client.	<p>A process map should be developed for all Council departments who are involved in offering Child and Family Care Services involving support workers. The process map should include, but not limited to, the following:</p> <ul style="list-style-type: none"> <li>• Instructions on how organise a care package involving support workers; and</li> <li>• The roles and responsibilities of all individuals involved in the care of the client including the Support Worker.</li> </ul> <p>Consideration should also be given to how cases where both children and adults are receiving support can be coordinated between Children's Services and Social Care.</p>
Management Response			
<p>Agreed.</p> <ul style="list-style-type: none"> <li>• A process map and guide will be created and shared with council staff to ensure they are clear about the process required to appoint and review agency workers as well as requirement for CQC registered providers when regulated activities are required</li> <li>• Where there is input from different departments in the council the guide will be clear about the expectations for sharing information and working together</li> </ul>			
Responsible Officer			Deadline
Mandy Lawson – Assistant Director of Special Educational Needs Bev Sharpe – Assistant Director Family Services			1 <sup>st</sup> September 2020

## Appendix 2: Definition of Assurance Opinions and Recommendation Priorities

In order to help put the audit opinion and recommendation priority ratings in context the following tables detail the current ratings used by Internal Audit.

Rating	Description
 <b>Su</b>	There is a sound system of control designed to achieve the objectives. Compliance with the control process is considered to be substantial and no material errors or weaknesses were found.
 <b>Sa</b>	While there is a basically sound system, there are weaknesses and/or omissions which put some of the system objectives at risk, and/or there is evidence that the level of non-compliance with some of the controls may put some of the system objectives at risk.
 <b>L</b>	Weaknesses and / or omissions in the system of controls are such as to put the system objectives at risk, and/or the level of non-compliance puts the system objectives at risk.
 <b>N</b>	Control is generally weak, leaving the system open to significant error or abuse, and/or significant non-compliance with basic controls leaves the system open to error or abuse.

Priority	Description
<b>High</b>	Recommendation addresses fundamental weaknesses, which seriously compromise the effective accomplishment of the system's objectives. Risks presented by the control weaknesses could be damaging in the short term. The management action required should be implemented as soon as possible, certainly within 0-3 months.
<b>Medium</b>	Recommendation addresses serious weakness, which affect the reliance to be placed on the system. Risks presented by control weaknesses could be damaging in the medium term. Management action is required within 0-6 months.
<b>Low</b>	Recommendation addresses minor weaknesses, or suggests a desirable improvement. Risks presented by control weaknesses are unlikely and inconsequential. Management action is recommended to address concerns within 0-9 months.

### Appendix 3: Audit Scope, Limitations & Inherent Risks

This audit was a full risk based review of the arrangements for engaging support workers through agencies and care providers and included the following areas:

Ref	Audit Area – Description	Comments on Coverage / Area Objectives
01	Commissioning of Support Workers	<p>Organisations that the Council uses for sourcing Support Workers have sufficiently rigorous controls over vetting candidates.</p> <p>Agencies engaged to deliver personal care to disabled children are registered with CQC.</p> <p>For each appointment of a Support Worker, the Council is assured that the individual has any particular vetting, qualifications, training and experience required for that engagement.</p> <p>Where the work of a Support Worker is unsatisfactory this is taken into consideration if they are put forward for another role in the future.</p>
02	Supervision and Performance Management	<p>Responsibility for overseeing agency Support Workers (whether this by the provider or the Council) is clearly defined.</p> <p>Support Workers are adequately briefed on what they are required to do and the performance of agency Support Workers is monitored to confirm they are undertaking the work required of them in an appropriate manner.</p> <p>Where the work of a Support Worker forms part of a wider package of care and support, this is well coordinated.</p>

The internal audit approach was developed through an assessment of risks and management controls operating within the agreed scope.

The following procedures were adopted:

- Identification of the role and objectives of each area;
- Identification of risks within each area which threaten the achievement of objectives;
- Identification of controls in existence within each area to manage the risks identified;
- Assessment of the adequacy of controls in existence to manage the risks and identification of additional proposed controls where appropriate; and
- Testing of the effectiveness of key controls in existence within each area.

Management should be aware that our internal audit work was performed in accordance with the Public Sector Internal; Audit Standards which are different from audits performed in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board.

Similarly, the assurance grading provided in our internal audit report are not comparable with the International Standard on Assurance Engagements (ISAE 3000) issued by the International Audit and Assurance Standards Board.

Our internal audit testing was performed on a judgemental sample basis and focussed on the key controls mitigating risks. Internal audit testing is designed to assess the adequacy and effectiveness of key controls in operation at the time of the audit.

Please note that, in relation to the agreed scope, whilst our internal audit will assess the efficiency and effectiveness of key controls from an operational perspective, it is not within our remit as internal auditors to assess the efficiency and effectiveness of policy decisions.

### **Limitations to the Scope of the Audit**

The following limitations to the scope of the audit were agreed when planning the audit:

- The work will be undertaken using a risk based approach and testing will be on a sample basis to verify compliance;
- The records maintained by third parties to the Council (such as agencies and care providers) will not be reviewed and are outside of the scope of this audit;
- This work will focus on support workers provided for Children's Services and not Adults.
- This audit work will not investigate or provide an opinion on the performance of individual support workers; and
- The audit review does not provide absolute assurance that material error, loss or fraud does not exist.

### **Inherent Risks**

The risks listed below are **potential** inherent risks which are common for any organisation of this type:

- Support Workers are appointed who have not been vetted, posing a risk of harm to service users.
- Support Workers are insufficiently skilled or experienced for the role they have been asked to undertake
- Support Workers are not subject to a sufficient level of supervision leading to poor performance or inappropriate practice issues not being identified and addressed.
- The work of Support Workers is not coordinated with other individuals involved in the care and support of service users.

## Appendix 4: Timetable and Distribution List

Stage	Date
End of Fieldwork	20/10/2019
Draft Report Issued	14/04/2020
Responses Received	29/07/2020
Final Report Issued	03/08/2020

Audit Team
James Graham – Client Engagement Manager
Dilen Navsaria – Auditor
Auditee
Bev Sharpe – Assistant Director of Family Services
Mandy Lawson – Assistant Director of Special Educational Needs
Client Sponsor
Bev Sharpe – Assistant Director of Family Services
Mandy Lawson – Assistant Director of Special Educational Needs

Report Distribution List
Bev Sharpe – Assistant Director of Family Services
Mandy Lawson – Assistant Director of Special Educational Needs
Hakeem Adelakun – Service Development Officer

The matters raised in this report are only those which came to our attention during our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required. Recommendations for improvements should be assessed by management for their full impact before they are implemented. The performance of internal audit work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices. We emphasise that the responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify all circumstances of fraud or irregularity. Auditors, in conducting their work, are required to have regards to the possibility of fraud or irregularities. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud. Internal audit procedures are designed to focus on areas as identified by management as being of greatest risk and significance and as such we rely on management to provide us full access to their accounting records and transactions for the purposes of our audit work and to ensure the authenticity of these documents. Effective and timely implementation of our recommendations by management is important for the maintenance of a reliable internal control system.

This report is prepared solely for the use of Audit Committees and senior management of the London Borough of Hammersmith and Fulham. Details may be made available to specified external agencies, including external auditors, but otherwise the report should not be quoted or referred to in whole or in part without prior consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended for any other purpose.