

## London Borough of Hammersmith & Fulham

**Report to:** Audit Committee

**Date:** 15/03/2022

**Subject:** Internal Audit Progress Report (December 2021 to January 2022)

**Report of:** David Hughes

**Responsible Director:** Director of Audit, Fraud, Risk and Insurance

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### Summary

This report summarises the status of work included in the 2021/22 Internal Audit Plan as at the end of January 2022. Fourteen audits have been finalised, one of which received a Substantial assurance opinion, ten receiving Satisfactory assurance and three Limited assurance.

The status of audits confirmed for inclusion within the Plan for the final quarter of the year, is shown in Appendix 2.

### Recommendations

1. For the Committee to note and comment on the report.

**Wards Affected:** None

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### H&F Values

Please state how the subject of the report relates to our values – delete those values which are not appropriate

Our Values	Summary of how this report aligns to the H&F Priorities
<ul style="list-style-type: none"><li>• Being ruthlessly financially efficient</li></ul>	The work undertaken by Internal Audit helps to ensure that management have robust controls and practices in place to safeguard the Council's assets, controlling expenditure and maximising potential income to protect and invest in essential frontline services which are in place to meet the Council's priorities

## Contact Officer:

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## Background Papers Used in Preparing This Report

None.

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## DETAILED ANALYSIS

### Internal Audit Work December 2021 to January 2022

1. The Audit Committee are provided with updates at each meeting on progress against the Annual Audit Plan and on any limited or no assurance audits issued in the period.
2. The Audit Plan for 2021/22 was reviewed by the Audit Committee in March 2021. To ensure that the Annual Audit Plan is more responsive to changing risks and challenges, it has been developed as a '3 plus 9-month' plan. This approach allows for the first three months to be identified in detail with the remaining nine months being more flexible to suit the needs of the Council at the time. The Plan is reviewed and updated following discussions with Directors, taking into account changing risks and priorities. The revised Plan is reported to the Committee on a quarterly basis and any significant changes in the coverage of the Plan will be highlighted.
3. Since the last report to Committee, fourteen audits have been completed:

Department	Audit	Assurance Opinion
Finance	Purchasing Cards	Satisfactory
	Treasury Management	Substantial
Resources	Agency Spend	Satisfactory
Children's Services	School Bursarial Services	Satisfactory
Schools	Vanessa Nursery	Limited
	St John's XXIII Primary	Satisfactory
	Flora Gardens Primary	Satisfactory
	St Paul's CE Primary	Satisfactory
Economy	Corporate Health & Safety	Satisfactory
	Housing Decants	Limited
	Homelessness	Satisfactory
	Security Resources Management	Limited
Environment	Parking PRP Administration	Satisfactory
	CCTV Contract Management	Satisfactory

4. A summary of the Limited Assurance reports is set out in Appendix 3. The full reports, including all the agreed actions are also published on the agenda for the Committee's consideration and to ask questions of relevant directors at the meeting (Appendices 4,5 and 6).
5. In addition, two advisory reviews have been completed in the following areas:
  - Use of Spot Contracts (Children's Services); and
  - Placements (Children's Services).

### **Internal Audit Opinion**

6. Although no overall assurance opinion can be given at this stage, the S151 Officer and the Committee can be assured that sufficient internal audit work is in progress to ensure an appropriate assurance opinion can be provided by the end of the financial year.
7. Appendix 1 shows the finalised audits as at the end of January 2022 and the status of the remaining planned audits is shown in Appendix 2.

### **Follow ups**

8. A total of 40 recommendations have been followed up in the year to date. Implementation of medium and high priority recommendations has been consistently effective with 85% of medium and high priority recommendations fully implemented with a further 15% partly implemented.

### **Consultation**

9. The report has been subject to consultation with the Strategic Leadership Team.

### **Legal Implications**

10. Regulation 3 of the Accounts and Audit Regulations 2015 sets out the Council's responsibility for ensuring that it has a sound system of internal control which:
  - a. facilitates the effective exercise of its functions and the achievement of its aims and objectives;
  - b. ensures that the financial and operational management of the authority is effective; and,
  - c. includes effective arrangements for the management of risk.
11. Regulation 5 requires the Council to ensure that it undertakes an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.
12. There are no particular legal implications arising from this report.

*Implications verified by Grant Deg, Chief Solicitor (litigation and employment), 07798 588 766.*

### **Financial Implications**

13. The Internal Audit Plan is delivered within the revenue budget for the service. Actions required as a result of audit work, and any associated costs, are the responsibility of the service managers and directors responsible for the areas which are reviewed.
14. The proposals contained in this paper have no additional resource implications for the audit service.

*Implications completed by Andre Mark, Finance Business Partner, 020 8753 6729 and verified by Emily Hill, Director of Finance, 0208 753 3145.*

### **Risk Management**

15. The Internal Audit Plan is developed and delivered to cover the key risks faced by the Council, to provide assurance on the key controls in operation and the effective management of key risks.

*Implications verified by Moira Mackie, Head of Internal Audit, 07800 513 192.*

### **List of Appendices:**

- Appendix 1 Summary of Audit Reports finalised as at end of January 2022
- Appendix 2 Audit Plan 2021-22 Status Report
- Appendix 3 Summary of Limited Assurance Reports
- Appendix 4 Internal Audit Report Vanessa Nursery School
- Appendix 5 Internal Audit Report Housing Decants
- Appendix 6 Internal Audit Report Security Resources Management

## Internal Audit – Finalised Audits

Plan Area	Auditable Area	Issued	Assurance level given	High Priority Recs	Medium Priority Recs	Low Priority Recs	Reported to Committee
Finance	Housing Rents (2020/21)	Sep-2021	Satisfactory	1	4	1	Dec-2021
Finance	Treasury Management (2020/21)	Nov-2021	<b>Substantial</b>	0	0	1	Mar-2022
Finance	Purchasing Cards	Jan-2022	Satisfactory	0	9	2	Mar-2022
<b>Resources: Transformation Talent &amp; Inclusion</b>	Agency Spend	Feb-2022	Satisfactory	2	0	1	Mar-2022
<b>Resources: Digital Services</b>	Post Implementation Review (Tectonic) (2020/21)	Aug-2021	Satisfactory	0	2	2	Sep-2021
<b>Resources: Democratic Services</b>	Elections Readiness (2020/21)	Aug-2021	<b>Substantial</b>	0	0	0	Sep-2021
<b>Children's Services</b>	Youth Endowment Fund Grant	Jul-2021	Advisory	1	1	0	Sep-2021
<b>Children's Services</b>	SEN Recoupment (2020/21)	Jul-2021	Satisfactory	0	2	0	Dec-2021
<b>Children's Services</b>	School Bursarial Services (2020/21)	Dec-2021	Satisfactory	1	1	0	Mar-2022
<b>Children's Services</b>	Spot Contracts (2020/21)	Jan-2022	Advisory	0	4	0	Mar-2022
<b>Children's Services</b>	Placements (2020/21)	Jan-2022	Advisory	2	2	0	Mar-2022
<b>Schools</b>	John Betts Primary	Jun-2021	Satisfactory	0	1	4	Sep-2021
<b>Schools</b>	Avonmore Primary (2020/21)	Jul-2021	Satisfactory	0	5	2	Sep-2021
<b>Schools</b>	Miles Coverdale Primary	Sep-2021	Satisfactory	0	3	1	Dec-2021

**APPENDIX 1**

**Internal Audit – Finalised Audits**

<b>Plan Area</b>	<b>Auditable Area</b>	<b>Issued</b>	<b>Assurance level given</b>	<b>High Priority Recs</b>	<b>Medium Priority Recs</b>	<b>Low Priority Recs</b>	<b>Reported to Committee</b>
<b>Schools</b>	St Augustine’s RC Primary	Sep-2021	<b>Substantial</b>	0	0	2	Dec-2021
<b>Schools</b>	Wendell Park Primary	Sep-2021	<b>Substantial</b>	0	0	2	Dec-2021
<b>Schools</b>	Sir John Lillie Primary	Oct-2021	Satisfactory	0	3	2	Dec 2021
<b>Schools</b>	St John’s XXIII Primary (2020/21)	Dec-2021	Satisfactory	0	6	2	Mar-2022
<b>Schools</b>	Flora Gardens Primary (2020/21)	Dec-2021	Satisfactory	0	3	2	Mar-2022
<b>Schools</b>	St Paul’s CE Primary	Dec-2021	Satisfactory	0	2	2	Mar-2022
<b>Schools</b>	Vanessa Nursery	Feb-2022	Limited	1	4	5	Mar-2022
<b>Social Care</b>	Supervision – Compliance (2020/21)	Aug-2021	Satisfactory	0	2	7	Sep-2021
<b>Social Care</b>	Mosaic Financial Controls (2020/21)	Nov-2021	Satisfactory	0	4	3	Dec-2021
<b>Economy</b>	Integrated Housing Management - Programme Management	Jun-2021	Satisfactory	0	3	6	Sep-2021
<b>Economy</b>	Service Charges (2020/21)	Oct-2021	Advisory	0	0	1	Dec-2021
<b>Economy</b>	Housing Decants (2020/21)	Oct-2021	Limited	3	5	4	Mar-2022
<b>Economy</b>	Security Resources Management (2020/21)	Dec-2021	Limited	1	9	0	Mar-2022
<b>Economy</b>	Corporate Health & Safety (2020/21)	Jan-2022	Satisfactory	1	4	0	Mar-2022
<b>Economy</b>	Homelessness (2020/21)	Jan-2022	Satisfactory	0	5	0	Mar-2022

**APPENDIX 1**

**Internal Audit – Finalised Audits**

<b>Plan Area</b>	<b>Auditable Area</b>	<b>Issued</b>	<b>Assurance level given</b>	<b>High Priority Recs</b>	<b>Medium Priority Recs</b>	<b>Low Priority Recs</b>	<b>Reported to Committee</b>
<b>Environment</b>	NNDR (2020/21)	Jun-2021	<b>Substantial</b>	0	0	1	Sep-2021
<b>Environment</b>	Grounds Maintenance – Contract Monitoring (2020/21)	Aug-2021	Satisfactory	0	3	1	Sep-2021
<b>Environment</b>	Property Management (Techforge)System	Oct-2021	Satisfactory	0	2	4	Dec-2021
<b>Environment</b>	Parking PRP Admin (2020/21)	Dec-2021	Satisfactory	1	2	5	Mar-2022
<b>Environment</b>	CCTV Contract Management (2020/21)	Dec-2021	Satisfactory	0	3	0	Mar-2022

## Internal Audit Plan 2021/22 – Status of Audits

Following discussions with the services, a small number of audits have been removed from the plan. Some of these may be deferred to a future year depending on the priorities and risks at the time.

Plan Area	Draft Report Issued	In Progress/ Due to Start	Removed from Plan
<b>Cross-cutting</b>		<b>2020/21:</b> <ul style="list-style-type: none"> <li>DPO/ GDPR Support (Information Assets)</li> </ul> <b>2021/22:</b> <ul style="list-style-type: none"> <li>RFE – Financial /HR Compliance</li> <li>Debt Management</li> <li>VAT</li> <li>Governance &amp; Compliance (gifts &amp; hospitality) – ongoing as required</li> </ul>	<ul style="list-style-type: none"> <li>Contract Management Framework - previous audits completed on contract management (Apr-21) and waivers (Oct-21) to inform audit work in 2022/23</li> <li>Business Continuity – implementation on going in 2021/22 inform work in 2022/23</li> <li>Programmes &amp; Project Management – deferred (IHMS complete in year). Consider in future year plan</li> </ul>
<b>Resources</b>	Transformation, Talent & Inclusion: <ul style="list-style-type: none"> <li>Overtime</li> <li>Employment Tribunals</li> </ul>	Transformation, Talent & Inclusion: <ul style="list-style-type: none"> <li>Equalities Impact Assessments</li> </ul> Legal Services: <ul style="list-style-type: none"> <li>Disrepair Legal Claims</li> </ul> Digital Services: <ul style="list-style-type: none"> <li>IT Asset Management</li> <li>Ransomware</li> <li>IT Audit Needs Assessment – March 2022</li> </ul>	Transformation, Talent & Inclusion (no longer required): <ul style="list-style-type: none"> <li>Sickness Absence</li> <li>Performance Management</li> <li>Annual Leave</li> </ul> Legal Services: <ul style="list-style-type: none"> <li>Accessibility Requirements (support in year)</li> </ul> Digital Services: <ul style="list-style-type: none"> <li>Remote Working Resilience (2022/23)</li> <li>IT Service Continuity Plans (2022/23)</li> </ul>
<b>Children's Services</b>	<ul style="list-style-type: none"> <li>No Recourse to Public Funds</li> </ul>	<ul style="list-style-type: none"> <li>Supporting People Claims (on-going)</li> <li>SEN (Advisory)</li> </ul>	
<b>Schools</b>	<ul style="list-style-type: none"> <li>Brackenbury Primary</li> </ul>	<ul style="list-style-type: none"> <li>Old Oak Primary</li> <li>William Morris 6<sup>th</sup> Form</li> </ul>	<ul style="list-style-type: none"> <li>Larmenier Sacred Heart Primary (deferred to 2022/23 – school request)</li> </ul>



## Internal Audit Plan 2021/22 – Status of Audits

Plan Area	Draft Report Issued	In Progress/ Due to Start	Removed from Plan
		<ul style="list-style-type: none"> <li>• Bayonne Nursery</li> <li>• Schools Thematic Work (VAT)</li> </ul>	
<b>Social Care &amp; Public Health</b>	<ul style="list-style-type: none"> <li>• PFI Programme</li> </ul>	<ul style="list-style-type: none"> <li>• Hospital Discharge</li> </ul>	<ul style="list-style-type: none"> <li>• Integrated Care Partnership (2022/23)</li> <li>• Learning Disabilities (replaced by hospital discharge)</li> <li>• S75 Agreement – West London NHS Trust – (no longer required)</li> <li>• Commissioning &amp; Procurement (2022/23)</li> </ul>
<b>Economy</b>	<ul style="list-style-type: none"> <li>• Maintenance of Play Equipment (2020/21)</li> <li>• Gas Safety</li> </ul>	<ul style="list-style-type: none"> <li>• DLO Communal &amp; Programmed Remedial Works</li> <li>• Fire Safety</li> <li>• Workzone</li> <li>• Tenant Service Charges</li> <li>• Lift Maintenance</li> <li>• Housing Repairs – Operations</li> <li>• Housing Repairs – Contact Centre (late Q4)</li> <li>• Capital Projects – Post Completion Records - TBC</li> <li>• HRA Cost Apportionment - TBC</li> </ul>	<ul style="list-style-type: none"> <li>• Leaseholder Debt (2022/23)</li> <li>• Capitalisation of Works (2022/23)</li> </ul>
<b>Environment</b>	<ul style="list-style-type: none"> <li>• Leisure Centres</li> </ul>	<ul style="list-style-type: none"> <li>• NNDR</li> <li>• Council Tax</li> <li>• Housing Benefits</li> </ul>	<ul style="list-style-type: none"> <li>• FOI/SARs – Consider for inclusion in 2022/23</li> </ul>

## Summary of Limited Assurance Reports

Ref	Audit and Scope	Details	Assurance
1	Vanessa Nursery School Cyclical review of governance and financial management.	<p>One high and four medium priority recommendations were made in the following areas:</p> <p><b>Procurement (high priority):</b>            Purchase orders were not being raised when it would be applicable to do so. Goods or services received checks could not be evidenced. Some payments had been made in excess of 30 days from the invoice date.</p> <p>The school confirmed that they had a new Admin Assistant in post who has now been trained on the Financial Management System and will be raising purchase orders correctly going forward. In addition, an improved process has been implemented to demonstrate that goods and services received have been checked. Covid-19 restrictions had impacted on the receipt of invoices through the post which had led to delays in payments but every effort is made to chase missing invoices to ensure that payment is made within 30 days.</p> <p><b>Governance (medium priority)</b></p> <p>Whilst we obtained evidence that individual members of the Governing Body had carried out a skills self-assessment, we were unable to confirm that a Governing Body skills audit had been undertaken with actions identified to address any skills gaps.</p> <p>The school confirmed that a skills audit is updated when a new Governor joins the Federated Governing Body, which was a small Governing Body and there have been difficulties in recruiting new members. It was noted that a skills audit was added to the agenda of the Full Governing Body meeting for their virtual meeting on 1st December 2021.</p> <p><b>Staff Expenses (medium priority)</b></p> <p>There is no Expenses Policy in place. We were informed that the reason for this is that staff can only claim expenses incurred for ordering goods to be used by the School. From the testing undertaken, there were no concerns that the purchases were not for the use of the school and claims were signed and authorised appropriately but where staff are reimbursed for expenses incurred there should be a clear policy which has been reviewed and agreed by the Governing Body.</p> <p><b>Asset Register (medium priority)</b></p> <p>The School does not have an up-to-date Asset Register in place. The copy available was last reviewed in May 2019. The School Business Manager acknowledged that the School is aware of this issue and had obtained a quote for an external consultant to come in to carry out an assessment In January 2022 and to update the Asset Register.</p> <p><b>Voluntary Fund (medium priority)</b></p> <p>The Nursery operates a voluntary fund which is administered by the School Business Manager. Voluntary funds with a turnover in excess of £20k per annum should be audited by a registered auditor. As of July 2021, the fund had a balance in excess of £20k and we were advised that the Voluntary fund had never been independently audited.</p> <p>The school has advised that an audit did take place 2017 which was undertaken by a qualified accountant, but the accountant was also a member of the Governing Body at the time (therefore not independent). Due to Covid-19 and school closures there has been very little movement in the account over the past 2 years but the school is seeking recommendations for an independent registered auditor to undertake an audit of the voluntary fund in Spring Term 2022.</p> <p><i>The School have confirmed the following actions have been taken as a result of the audit.</i></p> <ol style="list-style-type: none"> <li><i>Skills audit for Governors- this is on the agenda for the FGB meeting on 9<sup>th</sup> March 2022.</i></li> </ol>	Limited

Summary of Limited Assurance Reports

		<ol style="list-style-type: none"> <li>2. Declaration of interests- although this is minuted at each and every Governors meeting and all governors complete their declaration of interested at the beginning of the school year on Governor hub we have asked all governors to tick the relevant box termly before each FGB meeting to satisfy audit purposes.</li> <li>3. Scheme of delegation- this is presented and agreed at the beginning of each academic year in our Governors planning meeting in September, with the remote working practices of Covid none of these documents were signed for two years. The Clerk to Governors informed us that recording this in minutes was sufficient. However, we have now had all copied of statutory documentation signed and minuted at FGB meeting in Sept 2021.</li> <li>4. Purchasing of goods - small purchase do not require purchase orders – all purchases made are agreed in writing by the SMT (head or Deputy Head) where possible prior to purchase. Invoices received are paid within the 30 day time frame- where invoices are not received a note is make when payment is agreed.</li> <li>5. Lettings policy, charging policy, remunerations policy all updated and signed by governors in February 2022.</li> <li>6. Payroll reports- check monthly by SBM - Head Teacher now signs these monthly – which creates additional work for the HT.</li> <li>7. Asset register- this has been arranged for April 2022 – new company to install electronic system.</li> <li>8. As far as I am aware the only outstanding action is – the deadline for this is September 2022. We are sourcing a third party to have the voluntary funds audited that does not cost an extortionate amount of money for the relatively small amount of movement in these funds. These funds have not been used throughout the pandemic.</li> </ol> <p>A follow up review will be carried out to confirm the implementation of agreed recommendations and will be reported to the next meeting of the Committee.</p>	
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Ref	Audit and Scope	Details	Assurance
2	<p>Housing Decants</p> <p>On occasion it may be necessary for a council tenant to move out of their existing home to allow major works to be carried out or because their home is due to be demolished.</p> <p>This review considered the processes and controls in place for decanting Council tenants.</p>	<p>The review identified a number of areas for improvement with three high and five medium priority recommendations made in the following areas (with management updates in italics):</p> <p><b>Authorisation, Assessment and Costs</b></p> <p>The tenant will be made an offer of suitable and affordable decant accommodation, based on information from the Housing Needs Assessment, via an offer letter. <i>There is a Key Performance Indicator (KPI) for 50% of decant referrals to stay in situ while work is carried out or staying with family and friends. This was not being achieved at the time of the audit although it was recognised that this was particularly difficult to achieve during the coronavirus restrictions, which may have particularly impacted on performance.</i> For our sample of ten decants, an offer letter was in place for nine cases. For the remaining one case, no documents were held for the decant, as it was not brought to the attention of Supported Moves Team (SMT) until three months after the tenant had been decanted therefore, the SMT did not have the opportunity to scrutinise the decision to move the tenant to temporary accommodation as being the best option (high priority). <i>The service has agreed that discussions with tenants regarding remaining in situ whilst works are in progress should be captured on the Decant Request Form and that these will be reviewed to ensure that these conversations are taking place.</i></p> <p>Where a decant is required, surveyors inform the SMT of the request by completing a decant request form, which is signed by the surveyor and countersigned by management. Testing of a sample of ten decants from 2020/21 found that seven had a decant form in place, however, these were not always signed. In three cases there was no decant form completed (medium priority). <i>The service has amended the Decant Request Form so that it can be signed electronically. Decant requests will be rejected if not fully completed.</i></p> <p>During the home visit or phone call, the Supported Moves Officer (SMO) should advise the tenant of alternative options available to them, such as staying with family and friends, claiming food vouchers and considering mutual exchange. In emergencies, where Housing Management have decided that temporary accommodation is required, the tenant will move out of their property as soon possible and be offered bed and breakfast or hostel accommodation. We found one case from the sample of 10 decants where the tenant was placed in a commercial hotel, which is the most expensive</p>	<p><b>Limited</b></p>

### Summary of Limited Assurance Reports

		<p>option. There was also a case from the sample of 10 decants where the SMT was not made aware of the decant, to allow them to advise on alternative options (medium priority). <i>The Decant procedure has been updated to advise that commercial hotels should only be used in an absolute emergency and then for the minimal amount of time. The service is also monitoring the number of bed and breakfast and commercial hotel placements through their Decant register and where work extends longer than planned, officers are working to procure more economical accommodation.</i></p> <p><b>Licence Agreement:</b></p> <p>The licence agreement is between the Council and tenant, to agree the Council will provide the tenant temporary accommodation whilst necessary works are being carried out, but that the accommodation is by the way of licence only and subject to conditions. Testing of ten decants found two cases where an agreement was not in place (medium priority). <i>Staff have been reminded of the need for a signed licence agreement and this will be spot checked as part of casework management.</i></p> <p>On the day that the tenant is due to move into decant accommodation, the Supported Moves Officer will meet the tenant at their original property where the tenant will be required to sign a disclaimer form. Testing of the sample of 10 decants found six instances where a fully completed disclaimer form was not in place (high priority). <i>Staff have been reminded of the need to secure a signed disclaimer form and this is being recorded and monitored on the casework tracker.</i></p> <p><b>Support to Tenants:</b></p> <p>When tenants are required to decant because of disrepair or improvements, the tenants are offered compensation. Types of compensation payments include disturbance payment, removal costs, food costs, disconnection/reconnection costs, redirection of mail, and home loss payment. The SMO must complete a payment request form on behalf of the tenant, which must be signed by the Senior SMO. Once approved, it is uploaded to the payment system for further approval from the Allocations and Voids Service Manager. The SMO should record the payment in a spreadsheet which records all payments made by the Supported Moves Team. From the sample of ten decants, in three cases payments were made, of which two payments were not recorded on the spreadsheet (medium priority). <i>The service are undertaking weekly reconciliations between what is recorded on the payment spreadsheet and the Council's manual payments system and officers have been advised of the importance of undertaking the appropriate level of due diligence before requesting authorisation of a payment.</i></p> <p><b>Financial and Operational Management and Reporting:</b></p> <p>A KPI measuring decanted tenants returning to their property within the projected work timescale was in place, with a target of 100%. We were informed that the SMT do not have control over this KPI and that it is the responsibility of the Council's Repairs Team to ensure that repairs are completed on time to enable tenants to move back to their primary home. The appropriateness of this KPI for the SMT needed to be reviewed (high priority). <i>The service has reviewed the KPS and they have been amended and this KPI was agreed as not appropriate for the Decant Service. Regular and ongoing discussions continue regarding works progress and issues for delays which are recorded and monitored on the Decant casework tracker.</i></p> <p>The service should engage with the development of the new Housing Management System to determine how it could improve the decant process and remove reliance on other separate systems, such as introducing a workflow system for the decant process, which automates all steps of the process and allows for a complete audit trail of applications and approvals to be automatically maintained (medium priority). <i>The service is engaged with the Business Transformation project which oversees the IHMS implementation and a system workflow will be introduced if possible.</i></p> <p>As indicated, all of the recommendations made have been agreed and some have been confirmed as already implemented. A follow up review is currently being undertaken to verify the implementation of the recommendations and the outcome will be reported to the next meeting of the Committee.</p>	
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## Summary of Limited Assurance Reports

## Summary of Limited Assurance Reports

Ref	Audit and Scope	Details	Assurance
3	<p>Security Resources Management</p> <p>The Operational Security Management (OSM) team provides physical and strategic security to Council sites, staff and users.</p>	<p>One high and nine medium priority recommendations were made in the following areas (with management updates in italics):</p> <p><b>Policies and Procedures</b></p> <p>Procedures for deploying security staff to sites, when to use agency staff, completion of risk assessments etc., could not be located by the new Facilities Management (FM) Manager and there was no indication that any that may have previously existed, had been reviewed or updated for many years (medium priority). <i>This recommendation has been confirmed as implemented.</i></p> <p><b>Operational Risk Assessments:</b></p> <p>The FM Manager stated that the OSM team has created a new set of Security Workplace Risk Assessments for each site although there was no monitoring system in place to review when the risk assessment was carried out, by whom, and when the next assessment is due (medium priority). <i>This recommendation has been confirmed as implemented.</i></p> <p><b>Use of Agency Staff:</b></p> <p>We confirmed that the Council obtains temporary staff from two approved agencies. A Council-wide contract is in place with one of these agencies which includes the provision of security services but no contract was in place for the provision of more specialised services. The agency without a contract was used on an exception basis to cover short-notice absences (high priority). <i>The service has confirmed that the use of this agency is minimal and for emergency situations only with costs fully covered under Hard FM and no contract is required.</i></p> <p>Pre-checking of qualifications of agency workers is undertaken by the agencies prior to the staff member being assigned to the Council, with the staff member being required to wear their compulsory security guard licence whilst working. However, no evidence of these checks is sought from the agencies regarding these checks, even on a sample basis (medium priority). <i>The service has confirmed that actual SIA licenses are checked with any new security officers assigned to their sites but the agency provider will not issue a copy of the licenses or SIA numbers to them.</i></p> <p><b>Skills of Security Officers and Training</b></p> <p>Additional training is provided to staff members where there has been an update in the professional security qualification specification or if a complaint has been made in relation to the OSM team. However, evidence of this additional training is not maintained and there is no monitoring to confirm whether or not training has been completed by all relevant officers (medium priority). <i>This recommendation has been confirmed as implemented.</i></p> <p><b>Workforce Deployment and Performance Management</b></p> <p>The FM team is responsible for ensuring that there are adequate numbers of permanent security staff available for each site. A weekly staff rota is in place detailing the names of permanent security staff required to be present at each site. A review of a sample of staff rotas for five operational sites identified some which were secured solely by agency staff on a number of occasions (medium priority). <i>The service has undertaken a review of resourcing which is referred to in the monitoring section below.</i></p> <p>Each site manned by security staff has a log which is used to record all activities and incidents throughout the security officers' shift. The supervisor should complete the first section on commencement of duty and record the names of all security officers on duty. No evidence could be provided that this log was being completed on a daily basis at each of the sites and the OSM team do not monitor this. The log is only reviewed if a member of the public raises a complaint in respect of the security team on site</p> <p>For permanent staff, performance is monitored via the Council's annual performance management process but there is no other mechanism in place to</p>	Limited

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		<p>continually monitor staff performance in to order to identify areas of concern (medium priority).</p> <p>We were advised that the OSM team conducts spot checks on each site during the month to confirm that security officers are present as per the staff rota and are undertaking their roles as per the Assignment Instructions, however, the outcome of these spot checks is not formally recorded (medium priority). <i>The service has confirmed that they are improving the site login process to improve information on the security team onsite. Management do undertake spot checks and an inspection form has been introduced which will be used to demonstrate that these spot checks have taken place.</i></p> <p><b>Monitoring</b></p> <p>The OSM team is required to undertake a cost benefit analysis prior to the use of agency staff to determine whether the roles can be fulfilled by permanent staff. However, at the time of the audit, due to the need for rapid turnover for requests for the provision of security staff during the coronavirus pandemic, these exercises had not been completed for at least 12 months. The cost benefit analyses undertaken prior to the pandemic had not been formally recorded and retained (medium priority). <i>The service has approval from the Resources Management Board (RMB) to directly employ and recruitment is underway with the aim of having staff onboarded within the next 4 weeks.</i></p> <p>Whilst the OSM team is able to obtain a list of agency staff used from their contracted provider, there was no formal monitoring system in place detailing the number of agency staff being used, the length of their use or that they all hold the relevant qualifications. Furthermore, no monitoring process is in place in respect of agency staff supplied by the specialist provider (medium priority). <i>This recommendation has been confirmed as implemented.</i></p> <p>A follow up is currently being undertaken to confirm the implementation of the recommendations and the outcome will be reported to the next meeting of the Committee.</p>	
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