Final Internal Audit Report 2011/12

London Borough of Hammersmith and Fulham
Client Affairs (Property Protection)
November 2011

This report has been prepared on the basis of the limitations set out on page 13

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Introduction	As part of the 2011/12 Internal Audit Plan, agreed by the Audit and Pensions Committee on 17 February 2011, we have undertaken an internal audit of Client Affairs (Property Protection).
	This report sets out our findings from the internal audit and raises recommendations to address areas of control weakness and / or potential areas of improvement.
	The agreed objective and scope of our work is set out in the Audit Brief issued on 10 August 2011.

Audit Opinion &	None	Limited	Substantial	Full
Direction of Travel		L		

Area of Scope	Adequacy of Controls	Effectiveness of Controls	Recommendations Raised		
			Priority 1	Priority 2	Priority 3
Referrals			0	2	0
Recording of Items			0	3	0
Safeguarding of Premises and Items			0	2	0
Disposal of Items			1	0	0
Cessation of Property Protection		*	0	0	0

<sup>\*</sup>Weaknesses in this area are identified in the recommendations for the other areas

Please refer to the attached documents for a definition of the audit opinions, direction of travel, adequacy and effectiveness assessments and recommendation priorities.

#### **Key Findings Key Statistics** • Procedure notes do not include all relevant procedures such as disposal Number of referrals of items: Ref Type 2009/10 2010/11 2011/12\* Property Record Receipts detailing the items collected were completed in five of five cases tested but were only signed off by one staff member: **Funeral** 34 40 10 The referrals and property spreadsheets recording case details were not **Hospital Funeral** 12 6 updated for all relevant cases: **Property Protection** 48 43 23 Items are stored securely in 145 King Street where only the Client Team **Pets Property Protection** 12 6 4 have access but a periodic check to confirm all items are still present is not undertaken: Store Property Case status was not evidenced as reviewed in three instances and last protection 6 4 3 review, as documented on the referral spreadsheet, was July 2011 in 17 **Grand Total** 103 111 46 instances. We were informed these are informally discussed; and \* referrals to end of July for 2011/12. Disposals are not authorised by the Principal Client Affairs Officer and

disposal procedures are not included in the policies and procedures.

# Summary Findings

#### of Referrals

A referral form (RS108) was provided to the Client Affairs Section in all five cases tested. A referral spreadsheet is completed but it is not updated on a regular basis and does not include information of who referred the case.

One recommendation has been raised as a result of our work in this area.

#### **Recording of Items**

The Client Affairs Service Policies and Procedures were updated in July 2011 but these have not yet been formally reviewed. The procedure notes do not include all relevant procedures such as disposal of items.

The items collected at the client property are recorded on the property record/receipt which includes the names of two Client Affairs Officers. However, the property record/receipts were signed by one officer only.

In addition, photographs should be taken of properties where a health and safety risk exists but this process is not reflected within the procedure notes.

Recommendations have been raised as a result of our work in this area.

#### **Safeguarding of Premises and Items**

Items are stored at 145 King Street or at Ravenscourt Park Storage free of charge. Collected cash is paid into the cashiers and paying in slips are retained on file. Items in two of five cases tested were not found in the storage. Discussions established that these were returned to the client but this was not documented.

During the audit we identified that a property spreadsheet detailing the storage location for items under each case was not updated to also include the disposal date, status of the case and case number.

In addition, periodic checks to confirm that the items are still in storage were not being undertaken.

Recommendations have been raised as a result of our work in this area.

#### **Disposal of Items**

Items to be disposed are provided to a dealer who disposes of them on behalf of the Council. The valuation and disposal procedures are not documented in the policies and procedures. In addition, the disposals are not authorised by the Principal Client Affairs Officer and records of these are not kept.

The Client Affairs team do not obtain evidence from the dealer demonstrating how much each item was sold for. In addition, the team have used the same dealer for approximately 20 years and have not reviewed the arrangement to confirm that it continues to offer value for money.

In all five cases tested, there did not appear to be any high value items as per the property records/receipts.

One recommendation has been raised as a result of our work in this area.

#### **Cessation of Property Protection**

Items returned to the client were not recorded on the referral spreadsheet and the status of client accounts were not reviewed on a regular basis across all cases.

One recommendation has been raised as a result of our work in this area.

#### Acknowledgement

We would like to thank the management and staff of the Client Affairs team for their time and co-operation during the course of the internal audit.

#### 1. Review of Procedures

Priority	Issue	Risk	Recommendation
2	<ul> <li>The Client Affairs Service Policies and Procedures were updated in July 2011, but these have not yet been formally reviewed.</li> <li>Furthermore, the following exceptions were identified:</li> <li>The recording items process and the type of items that should be stored are not detailed within the procedure;</li> <li>Photographs were not taken in all cases as required by the Client Affairs Service Policies and Procedures. Photographs were only taken if the property was a health and safety risk assessment;</li> <li>The procedure states that items are stored for a month free of charge at Ravenscourt Park and then transferred to a central storage. This does not occur in practice, with three out of the five items tested having been stored up to 3 to 4 months and one out of five items for 7 months free of charge; and</li> <li>The disposal policies and procedures are not formally documented.</li> </ul>	Where procedure notes are not regularly reviewed, updated and evidenced as such or do not contain guidance on all tasks undertaken, there is a risk that staff follow incorrect or out-of date working practices.	Procedure notes should be regularly reviewed and updated where appropriate. Evidence of this should be retained for example through the use of version control. The policies and procedures should be updated to include:  The correct procedure for taking photographs;  The procedure for disposal of items, including retention periods and the nature of items to be retained;  The requirement for two officers to sign off the property record/receipt where practical;  How to complete the property receipt;  How items should be recorded on the property spreadsheet; and  Storage at Ravenscourt Park.
Manageme	ent Response		Responsible Officer Deadline
	d all recommendations are implemented. The etails of the disposal of items are accessed v	•	Principal Client Affairs Officer 08/11/2011

#### 2. Review of Referral Spreadsheet

Priority	Issue	Risk	Recommendation	on
2	<ul> <li>Through examination of the referral spreadsheet, we identified the following exceptions:</li> <li>Columns that were not fully completed with current information;</li> <li>Four out of five disposal dates were not recorded; and</li> <li>Items returned are not recorded within the referral spreadsheet under the remarks column for all cases.</li> </ul>	•	spreadsheet on a periodic basis	•
Management Response			Responsible Officer	Deadline
Agreed The recommendation is implemented.			Principal Client Affairs Officer	10/10/2011

# 3. Periodic review of property protection cases

Priority	Issue	Risk	Recommendation	on
2	Three out of the thirty one cases recorded on the referrals spreadsheet had no review dates recorded on the referral spreadsheet and the last review date was July 2011 in seventeen cases.  Discussions established that all cases have been verbally discussed amongst the team on an ongoing basis but not formally documented within the referral spreadsheet.	regularly, there is a risk that referrals are not promptly processed and premises are not secured.  In addition, where review is not undertaken periodically, the need to cease property protection may not be	documented in the referral spread	dsheet to evidence
Management Response			Responsible Officer	Deadline
Agreed. The recommendation is implemented and the information can be accessed via the referral register.		Principal Client Affairs Officer	31/10/2011	

# 4. Property record/receipt should be completed and signed by two Client Affairs Officers

Priority	Issue	Risk	Recommendation
2	For the five property protection cases tested, the following exceptions were identified:  • Two of five property record/receipts tested were not completed by two officers. One of the cases (2693) relates to items that were brought in by a client but only verified by one officer. Another case (2681) had two visits but only one receipt form dated 13/07/2011. The visit on 27/05/2011 had an email confirmation of items found and was completed by one officer rather than two (case number 2681); and  • All five cases were signed by one Client Affairs Officer only.	Where it cannot be clearly demonstrated that items were recorded upon entering the premises by two officers, there is a risk that family members may accuse staff of stealing, damaging or failing to adequately secure items resulting in reputational damage and claims against the Council.	Two officers should be present when items are collected.  Staff should be reminded that the property record/receipt should be signed by both Client Affairs Officers undertaking the visit / collecting items where practical.
Manageme	ent Response		Responsible Officer Deadline
Agreed & II	mplemented		Principal Client Affairs Officer 10/10/2011

# 5. Review of Property Spreadsheet

Priority	Issue	Risk	Recommendation	
2	The five cases from the referral spreadsheet tested (2699, 2693, 2698, 2710 and 2681) could not be found on the Property spreadsheet.  Discussions with the Principal Client Affairs Officer established that the spreadsheet may not have been updated with these cases. Two of these cases date back to May 2011.  Furthermore, the property protection document was not password protected and was saved on the shared drive.  It should be noted that information on property stored is recorded on individual property record/receipts.  In addition, we could not establish the dates of when the items were stored in the cupboard, disposed and returned to clients.	kept up to date there is a risk that all	The property spreadsheet should I updated to ensure all cases and pro including details of when the iter disposed or collected.  The document should be passwo maintain integrity of the data and clients.	perty is recorded, ms were stored, and protected to
Management Response			Responsible Officer	Deadline
Agreed. & r	Agreed. & recommendation implemented. Can be accessed via the referral register.		Principal Client Affairs Officer	01/12/2011

# 6. Detailed case reports

Priority	Issue	Risk	Recommendation	
2	In two of the five cases, the items returned to the Social Worker or client could not be verified. Items were not present in storage and discussions established they had been returned; however this was not evident from the case report (cases 2699 and 2683).	information on items collected or disposed of during the visit, there is a risk that items cannot be located and future family claims result in financial	a de la companya de l	
Manageme	nt Response		Responsible Officer	Deadline
Agreed. Now implemented. More detailed case reports being written.			Principal Client Affairs Officer	10/10/2011

# 7. Periodic checks on items within storage/cupboard

Priority	Issue	Risk	Recommendation	
2	checks of items within the storage / cupboard against the Property	periodically checked against the	0	
Management Response			Responsible Officer	Deadline
Agreed. This has been implemented. With a review date in the referral register.		Principal Client Affairs Officer	01/12/2011	

# 8. Item valuations and disposals

Priority	Issue	Risk	Recommendation	on
1	Items to be disposed of are provided to a dealer who disposes of the items and pays the Council the proceeds.  Discussions established that:  Item disposals are not formally approved;  The Client Affairs team do not obtain evidence from the dealer demonstrating how much each item was sold for; and  The team have used the same dealer for approximately 20 years and have not reviewed the arrangement to confirm that it continues to offer value for money.  The team do not keep records of the items that have been disposed of.  In all five cases tested, there did not appear to be any high value items as per the property records/receipts.	Where assets are not disposed of (sold/liquidated) in an appropriate manner, there is a risk that the maximum value of the items may not be realised or that these items should not have been disposed of.  Where records of these disposals are not maintained, there is a risk that the Council may not be able to provide a full account of items that are no longer in storage.	Disposal of items and the disposal subject to formal approval. Red disposed of and disposal date shot This may be recorded on the Proper Where items are to be sold through breakdown of item valuations should approve before proceeding with the arrangement with the current reviewed to gain assurance that it appropriate arrangement and offers	ords of the items buld be maintained. erty Spreadsheet. bugh the dealer, a bould be requested ith the sale. It dealer should be continues to be an
Manageme	ent Response		Responsible Officer	Deadline
reviewed as	et two points of the recommendation. The arra part of the Tri-Borough Proposals in accorda tion timetable.	•	Principal Client Affairs Officer	1&2. 10/10/2011 3. 01/04/2013

# Statement of Responsibility

We take responsibility for this report which is prepared on the basis of the limitations set out below.

The matters raised in this report are only those which came to our attention during the course of our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you 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. The assurance level awarded in our internal audit report is not comparable with the International Standard on Assurance Engagements (ISAE 3000) issued by the International Audit and Assurance Standards Board.

# Deloitte & Touche Public Sector Internal Audit Limited London

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