

Blackpool Council

17 June 2020

To: Councillors Burdess, Callow, Collett, Cox, Critchley, Galley, Hugo, Mitchell and Roberts

The above Members are requested to attend the:

AUDIT COMMITTEE

Thursday, 25 June 2020 at 6.00pm
via Zoom meeting

A G E N D A

1 DECLARATIONS OF INTEREST

Members are asked to declare any interests in the items under consideration and in doing so state:

(1) the type of interest concerned either a

- (a) personal interest
- (b) prejudicial interest
- (c) disclosable pecuniary interest (DPI)

and

(2) the nature of the interest concerned

If any Member requires advice on declarations of interests, they are advised to contact the Head of Democratic Governance in advance of the meeting.

2 MINUTES OF THE LAST MEETING HELD ON 12 MARCH 2020 (Pages 1 - 8)

To agree the minutes of the last meeting of the Audit Committee held on 12 March 2020 as a true and correct record.

3 STRATEGIC RISK REGISTER - PANDEMIC INFECTION (Pages 9 - 44)

To consider the controls being implemented to manage the strategic risk relating to pandemic infection.

4 EXTERNAL AUDIT INTERIM REPORT

To receive a verbal update from Deloitte on the ongoing Audit.

5 ANNUAL AUDIT OPINION (Pages 45 - 58)

To consider the annual audit report for the year ended 31 March 2020.

6 RISK SERVICES REPORT QUARTER FOUR (Pages 59 - 78)

To consider and note a summary report of the work completed by Risk Services in quarter four of the 2019/2020 financial year.

7 QUALITY ASSURANCE AND IMPROVEMENT PROGRAMME (Pages 79 - 92)

To consider and approve the Quality Assurance and Improvement Programme for the internal audit service for 2020/2021.

8 AUDIT COMMITTEE SELF EVALUATION AND TRAINING PROGRAMME (Pages 93 - 102)

To consider the outcome of the self-evaluation exercise and to approve the training programme as well as to consider the other actions as identified in the report.

9 DATE OF NEXT MEETING

To note the date and time of the next meeting of the Committee as Thursday 24 September 2020, commencing at 6pm.

Other information:

For queries regarding this agenda please contact Elaine Ireland, Democratic Governance Senior Adviser, Tel: 01253 477255, e-mail elaine.ireland@blackpool.gov.uk

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Present:

Councillor Galley (in the Chair)

Councillors

Burdess	Collett	Critchley	Mitchell
Callow	Cox (Items 1-10 only)	Farrell (Items 1-10 only)	Roberts (Items 3 - 11 only)

In Attendance:

Mr Naresh Chohan, Internal Auditor
Mr Neil Jack, Chief Executive
Mr Phil Redmond, Chief Accountant
Mr Steve Thompson, Director of Resources
Mr Mark Towers, Director of Governance and Partnerships
Mrs Elaine Ireland, Senior Democratic Governance Adviser

Mr Craig Wisdom, Deloitte Partner

Also Present:

Councillor Mrs Callow, Chair of the Scrutiny Leadership Board

1 DECLARATIONS OF INTEREST

There were no declarations of interest on this occasion.

2 MINUTES OF THE LAST MEETING HELD ON 23 JANUARY 2020

The Committee agreed that the minutes of the meeting held on 23 January 2020 be signed by the Chairman as a true and correct record.

3 BUDGETARY CONTROL AUDIT FOLLOW-UP

[Councillor Roberts joined the meeting during consideration of this item.]

Mr Phil Redmond, Chief Accountant presented the Committee with a progress report on the recommendations made following the internal audit review of Budgetary Control. The scope of the review had been to ensure that adequate and effective controls were in place to minimise financial risks in relation to budgetary control. The Committee was informed that overall it had been assessed that an adequate system of budgetary control was in place, but that controls around journal transfers and training had been identified as requiring further enhancement.

In relation to R1 'The i-Pool course 'Financial Management Training' should be reviewed and

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updated and rolled out to existing budget holders and those new in post with financial responsibilities' Mr Redmond reported that the Financial Management i-Pool course had been reviewed, updated and sent to the i-Pool systems administrator for uploading. Following a question on how the new module differed to the replaced training course, Mr Redmond advised that the previous course had been introduced five years ago and as such was out of date and required a refresh. The Committee was informed that the new content would be available within the next seven weeks. With regards to member training, Mr Redmond confirmed that following the closure of the year-end accounts, training would be provided on the 2019/2020 Statement of Accounts.

The Committee noted that all of the seven recommendations had been implemented with the exception of the following two:

R6 'The cash limited budget regime should be consistently applied or the policy should be amended to reflect current practices.' Mr Redmond advised that the Medium Term Financial Sustainability Strategy would be updated after the Spending Review 2020, following which the policy would then be reviewed.

R7 'The service should continue to review all of the user roles and profiles within the Finance teams and roll this out across the Council to align the authorisation limits in Cedar to the Corporate Scheme of Delegation.' The Committee was informed that as the Scheme of Delegation had now been updated, the review of user roles and profiles would be undertaken.

When asked which recommendation had proven to be the most beneficial from the review, Mr Redmond identified that R2 'Local schemes of delegation should be implemented for each directorate in line with the Corporate Scheme of Delegation requirements,' had been constructive due to the five local schemes of delegation which resulted.

4 STRATEGIC RISK REGISTER - INEFFECTIVE GOVERNANCE

The Committee considered a progress report outlining the individual risks identified within the Strategic Risk – Ineffective Governance, from the Council's Strategic Risk Register.

Mr Mark Towers, Director of Governance and Partnerships provided an overview of the sub-risk 'Data theft, leakage and breaches.' Mr Towers informed the Committee that the Council had accepted an invitation from the Information Commissioner's Office (ICO) to undertake a consensual audit to take place during the week commencing 21 September 2020 and that a key focus of the audit would be to determine whether the Council had adequately implemented policies and procedures to regulate the processing of personal data and as such would be a good measure of the activities currently in place. When questioned on the resource impact of the impending audit, Mr Towers acknowledged that the resulting increase in workload had impacted a number of target deadline dates and that external help by way of the current partnership with Blackpool Teaching Hospitals Trust had been brought in to help the team prepare.

Mr Steve Thompson, Director of Resources updated the Committee in relation to the sub-

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risk 'Increased risk of fraud.' Members questioned whether cross-working between departments and with the Department for Work and Pensions (DWP) had been hindered by General Data Protection Regulation guidelines. Mr Thompson replied that data sharing with the DWP was permitted and it had been working very effectively.

In response to a query regarding whether the Council had its own dedicated Counter-Fraud team, Mr Naresh Chohan, Internal Auditor confirmed that the Council's Counter-Fraud team consisted of one Senior Counter Fraud Adviser and two Corporate Fraud Officers.

With regards to the sub-risk 'Non-compliance with statutory requirements and internal procedures' Mr Towers confirmed that a Good Governance Group had been established, chaired by himself and attended by the Head of ICT Services, the Head of Audit and Risk and the Head of Legal Services, amongst others. The work of the group would be publicised via the publication of the Annual Governance Statement with links within this to a range of documents aimed at promoting good governance practices.

Mr Thompson advised that in relation to the sub-risk 'Lack of effective risk management embedded across the Council' a number of potential solutions for a risk management system were still being considered but that the associated costs were proving prohibitive.

Members raised a number of questions around the sub-risk 'Failure to effectively manage equality and diversity legislation.' Mr Neil Jack, Chief Executive advised that the action to ensure that the Council's Wholly Owned Company's Boards were aware of their responsibilities in relation to public sector equality had been introduced in response to a variety of legislative measures being developed in this area.

5 RISK SERVICES REPORT QUARTER THREE

The Committee considered the Risk Services Quarter Three report which provided a summary of the work completed by Risk Services in quarter three of the 2019/2020 financial year.

Mr Chohan, Internal Auditor informed members that all audits had now either been scoped, planned or were about to commence. Following the recent restructure of Internal Audit, all posts had now been successfully filled.

A question was raised as to the reasons behind only 91 per cent of Council services demonstrating up to date business continuity plans. Mr Thompson, Director of Resources clarified that plans had been in place within all departments but that in some cases evidence of sufficient updates had been lacking. He assured members that arrangements were in place to address this issue. Mr Jack, Chief Executive reiterated that all corporate business continuity plans which had been identified as essential were up to date.

The Committee noted that the Communications team had not yet updated either their business continuity plan or their Risk Register, with assurances provided by Mr Thompson that both these would be addressed prior to the next report to the Audit Committee.

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Discussion was held around the Performance Indicator measuring the number of trained Emergency Response Group volunteers. Mr Chohan advised that the 2019/2020 target had not been achieved and was questioned regarding the recruitment of suitable volunteers from the Council's Wholly Owned Companies (WOC). Mr Jack advised that such recruitment may not be appropriate from all of the WOCs and that volunteers were largely sought from Highways and Adult Social Care as they demonstrated the necessary knowledge and skills. The Committee requested that the Director of Adult Services be invited to attend the next meeting of the Audit Committee in order to provide an update and further information.

Committee members were informed that insurance renewals for April 2020 onwards would be placed under the long term agreements procured in April 2019 for a period of up to five years. The financial benefits of securing long term agreements were questioned and Mr Thompson assured the Committee that sufficient savings had been secured by committing to five year contracts.

Mr Towers, Director of Governance and Partnerships was questioned over the maintenance of a register of interests for Council Officers. He confirmed that a register was maintained and updated annually and anticipated that the introduction of an electronic system should make the process quicker and easier.

Mr Chohan drew the Committee's attention to any completed audits which were rated as Inadequate or where Priority One recommendations had been made. Discussion occurred around the audit of Contract Management and Social Value which had resulted in two Priority One recommendations and internal audit had identified that the implementation of effective contract management was inconsistent across the Council. Mr Thompson summarised that the procurement process had been recognised as just the start of any contractual agreement and that the monitoring of contractor performance would be necessary throughout the duration of a contract. A new Social Value Coordinator post had been created and recruited to which would create capacity and resource to further strengthen arrangements.

Further information was requested regarding the proposed Contract Management training. Mr Thompson explained that a risk-based targeted programme of training would be introduced, with additional information to be provided to the Committee at a future meeting.

6 INTERNAL AUDIT PLAN 2020/2021

Mr Chohan, Internal Auditor explained the process of formulating the Internal Audit Annual Plan. The Committee was informed that each risk based review would include core areas of internal control such as business planning, performance monitoring and security of assets. Segregation of duties in key processes would remain an important focus given the current economic climate and issues identified from past work. Compliance testing would account for approximately forty per cent of the allocated audit resource to complement risk based audit work with a robust set of compliance testing. Members were assured that changes to the programme of risk based work would only be made following discussion with the Council's Section 151 Officer. Any changes would be notified to the Audit Committee

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through the quarterly report of the Head of Audit and Risk.

The Committee questioned whether any areas for review had been excluded from the annual plan due to a lack of resources, with Mr Chohan confirming that all areas requiring review had been included.

Questioning occurred around the issue of 'Value for Money', with members querying whether the required entrepreneurial skills were evident across the audit team. Mr Thompson advised that should skills gaps be identified then any required services could be sourced externally as needed.

The Committee agreed: To approve the Internal Audit Plan for 2020/2021.

7 INTERNAL AUDIT CHARTER

Mr Chohan, Internal Auditor presented the Internal Audit Charter for 2020/2021 and explained that it established Internal Audit's position within the Council and defined the scope of Internal Audit activities and reporting lines. The Chartered Institute of Public Finance and Accountancy (CIPFA) and the Chartered Institute of Internal Auditors (CIIA) set the Internal Audit standards in respect of local government across the UK and adopted a common set of Public Sector Internal Audit Standards in April 2013. The Charter followed the model document provided by the CIIA.

The Committee agreed: To approve the Internal Audit Charter 2020/2021.

8 FRAUD PREVENTION CHARTER

Mr Chohan, Internal Auditor presented the Fraud Prevention Charter 2020/2021 and provided information on the outcome of the CIPFA fraud benchmarking exercise from 2019.

The Charter outlined how Blackpool Council was committed to the prevention of fraud and corruption and the importance of the Council using its income and resources in the most effective way for the delivery of high quality services to the community. As such Blackpool Council required all employees and elected members to act honestly, with integrity and to safeguard the public resources for which they were responsible. The Council also expected the same levels of honesty and integrity from all individuals and companies which it dealt with. The Council would take appropriate action when fraud, bribery or corruption was suspected.

Mr Chohan explained that the Fraud Prevention Charter set out the Council's Anti-Fraud and Corruption Statement which outlined the Council's zero tolerance approach when dealing with fraud, corruption and bribery. It also outlined the fraud risk assessment and associated counter fraud programme which was based on best practice guidance from the CIPFA to ensure that it took account of emerging threats and focused on priority fraud risks.

Also presented to the Committee were the results of last year's CIPFA Fraud and Corruption

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Tracker (CFaCT) survey. The Senior Counter Fraud Adviser completed the annual CIPFA Fraud and Corruption Tracker survey on behalf of the Council, the results of which provided a national picture of fraud, bribery and corruption across UK local authorities and the actions being taken to prevent it, with the results of the tracker survey having been used to assist with the development of the Council's Fraud Prevention Charter.

Discussion was held around the fraud types and estimated associated value, with clarification sought on whether budgetary provisions were made for estimated fraud values. Mr Thompson, Director of Resources advised that whilst specific provision for incidences of fraud was not included within the budget, estimated figures for non-collection of Council Tax were included.

When asked whether any links with the Communications team were planned in order to raise awareness of future anti-fraud programmes, Mr Jack, Chief Executive stated that such promotion was currently utilised on an ad-hoc basis but that a more strategic approach could be beneficial.

The Committee considered the subject of business rate fraud, in particular cases where there had been a failure to list properties as being a business address. Mr Jack clarified that improved joint working between the HMRC and other agencies, including the Council, had resulted in better targeting of efforts in reducing the potential for fraud and that work continued in this area to make use of data matching.

The Committee agreed: To approve the Fraud Prevention Charter for 2020/2021.

9 STRATEGIC RISK REGISTER 2020/2021

The Committee considered the Council's revised Strategic Risk Register for 2020/2021. Members were reminded that Blackpool Council's Risk Management Framework 2018-2021 had been agreed by the Audit Committee on 18 January 2018. This set out the roles and responsibilities of the Audit Committee which included to monitor the adequacy of the Council's risk management arrangements; to approve the strategic risk register and consider progress reports on the risks included in it; to gain assurance about the extent to which risk management objectives were being met and to approve the Council's Risk Management Framework. The Strategic Risk Register was reviewed and updated by the Corporate Risk Management Group and the Corporate Leadership Team whilst also receiving annual approval from the Audit Committee.

Throughout 2019/2020 Risk Owners were required to attend Audit Committee on a periodic basis to provide an update in terms of how each risk was being managed and it was proposed that this would continue throughout 2020/2021.

The Committee requested an update on the Covid-19 situation. Mr Jack, Chief Executive advised that the role of the Council in the continuation of the provision of vital services was being closely monitored and the national advice provided by the government would be adhered to. Mr Jack summarised the recent advice issued by the Chief Medical Officer and stressed the importance of assisting in the delay of the spread of the virus to alleviate pressure from the National Health Service (NHS). He assured the Committee that additional

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cleaning of touch points within Council buildings had been introduced, as well as provisions for staff to work from home to be strengthened but reiterated that the priority would be the continuation of essential services to vulnerable residents.

The Committee agreed: To approve the Strategic Risk Register 2020/2021.

10 EXTERNAL AUDIT PLAN 2019/2020

Mr Craig Wisdom, Deloitte Partner presented the External Audit Plan 2019/2020 and advised that the scope would be broadly in line with the previous year's plan. He highlighted that the risk of Covid-19 had not been included in the plan but that as the situation had since taken on greater significance, it would now be impacting on the audit in a number of ways. The audit timetable had been scheduled for June/July 2020 but the Committee was informed that this may require amendment as a result of the impact of Covid-19.

Mr Wisdom confirmed that the additional audit fees for the 2018/2019 financial statements had been reduced and a new figure of £18,000 had been agreed with the Council. The plan contained three areas where the professional fees had yet to be confirmed: Additional fee for Houndshill acquisition; Additional fee for IFRS 16 and Additional fee for changes in the current year. Mr Wisdom explained that in the interests of full transparency regarding any potential changes of fees, these areas had been identified as ones which may require additional discussion with the Council. In light of the changing landscape regarding the Covid-19 situation, Mr Wisdom advised that any necessary changes to the plan would be communicated to the Council and the Audit Committee as necessary. Mr Thompson, Director of Resources acknowledged that although the agreed fee had been allocated within the Council's budget, any additional charges would be met via contingency funds.

With regards to the 'Value for Money' Risk 2 'Financial Sustainability', the Committee sought assurance regarding the resilience of the Council's reserves. Mr Wisdom confirmed that the reserves would be closely scrutinised as well as consideration being given to additional pressures arising from the Covid-19 outbreak.

The Committee agreed: To note the External Audit Plan for 2019/2020.

[Councillors Farrell and Cox left the meeting following consideration of this item.]

11 DATE OF NEXT MEETING

The date and time of the next meeting of the Committee was noted as 30 April 2020, commencing at 6pm.

Cllr Galley, Chairman

(The meeting ended at 8.00 pm)

MINUTES OF AUDIT COMMITTEE MEETING - THURSDAY, 12 MARCH 2020

Any queries regarding these minutes, please contact:
Elaine Ireland, Democratic Governance Senior Adviser
Tel: 01253 477255
E-mail: elaine.ireland@blackpool.gov.uk

Report to:	AUDIT COMMITTEE
Relevant Officers:	Arif Rajpura, Director of Public Health
Date of Meeting	25 June 2020

STRATEGIC RISK REGISTER – PANDEMIC INFECTION

1.0 Purpose of the report:

- 1.1 To consider a progress report on individual risks identified in the Council's Strategic Risk Register.

2.0 Recommendation(s):

- 2.1 To consider the controls being implemented to manage the strategic risk relating to pandemic infection.

3.0 Reasons for recommendation(s):

- 3.1 To enable the Audit Committee to consider an update and progress report in relation to an individual risk identified on the Strategic Risk Register.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

- 4.1 The relevant Council priority is organisational resilience.

5.0 Background Information

- 5.1 At its meeting on 12 March 2020, the Audit Committee agreed to continue to invite Strategic Risk Owners to attend future meetings to provide updates and progress reports in relation to the individual risks identified on the Strategic Risk Register.

Does the information submitted include any exempt information? No

List of Appendices:

Appendix 3(a) - Strategic Risk Register Progress Report –Pandemic Infection.
Appendix 3(b) – Covid Secure Corporate Risk Assessment.

6.0 Legal considerations:

6.1 Risks need to be effectively managed in order to comply with relevant legislation.

7.0 Human Resources considerations:

7.1 The controls being implemented will be undertaken by current employees.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 The controls being implemented will be done so within current budget constraints.

10.0 Risk management considerations:

10.1 To enable the Audit Committee to gain assurance that strategic risks are being effectively managed.

11.0 Internal/ External Consultation undertaken:

11.1 The progress report has been prepared in conjunction with risk managers and/or risk owners.

12.0 Background papers:

12.1 None.

Strategic Risk Register Progress Report**Strategic Risk: Pandemic Infection**

No	Risk	Sub No.	Sub-Risk	% Overall Weighting	Impact / Consequences	Opportunity	Gross Risk Score			Controls and Mitigation	Nett Risk Score			Further Actions	Risk Manager	CLT Risk Owner	Target Date	Council Priority
							I	L	GS		I	L	NS					
							4	Pandemic Infection	4a		Impacts on the Council's ability to deliver critical services.	100%	Unable to provide adequate staffing to provide critical Council services. Impact on the supply chain as goods sourced internationally can not be obtained.					
Overall Nett Risk Score											15.0							

Strategic Risk Register Progress Report

Sub-Risk: Impacts on the Council's ability to deliver critical services and wider impacts on the Town. (weighting 100%)		Gross Risk Score	Nett Risk Score
		25	15
<i>Risk Score in 2019/20</i>		N/A	N/A
Risk Owner: Director of Public Health			
Existing Controls in Place:			
<ul style="list-style-type: none"> • Links in place between the Public Health Team and Public Health England including liaison with the Chief Medical Officer. • Staff signposted to advice provided by Public Health England. • Business continuity plans in place across the Council. • Arrangements in place for the storage of protective equipment if needed. • Multi-agency working across via the Lancashire Resilience Forum. 			
Actions:			
Actions	Risk Manager	Current Position	Outcomes / Results
Ongoing liaison with Public Health England to assess emerging risks and ensure appropriate mitigating actions are taken. (Target Date: March 2021)	Public Health Consultant	<ul style="list-style-type: none"> • Cases of COVID-19 started to increase rapidly in the UK during the month of March. • Major Incident Declared by Council on 23rd March 2020. • Government introduced a lockdown on the same day. • Council implementing measures to limit the spread of infection, working from home where possible, asking residents to self-isolate if they have symptoms, amplifying the stay at home message, hand washing, Catch It Bin It Kill It. • Care Home outbreaks continue to be a concern. 	<ul style="list-style-type: none"> • Current measures are suppressing the number of cases and deaths and we have now passed the peak and cases and deaths are now declining. • Death Data from the ONS up to the 17th of April shows that Blackpool has a low death rate from COVID when compared to other areas. • Corona Kindness Community Hubs are providing valuable support to many vulnerable people in our community by delivering essential support such as food and medicines • Adult Social Care have created a dedicated Provider Support and Resilience Hub to

Strategic Risk Register Progress Report

		<ul style="list-style-type: none">• Some restrictions have now been eased with regard to outdoor physical activity and more freedom for certain sections of the economy to return to work under strict COVID precautions.• On the 1st of June we moved into phase 2 of the pandemic response which will include limited opening of primary schools along with some non-essential retail also opening.• As the cases decline and we move into phase 2 of our response, we have moved to the Test, Track and Isolate phase. This will be important in our efforts to contain localised outbreaks.• Phase 3 will commence on the 4th of July with further restrictions being lifted on the hospitality industry.• All of these changes will be kept under strict review. If cases start to increase again then stricter measures may be re-implemented.• Main way out of this pandemic will be with a vaccine.• COVID-19 likely to be with us for the foreseeable future and we may well see further waves of infection in the months to come.	<p>provide practical support to any social care provider requiring assistance including supply of PPE, infection control advice and urgent staffing support.</p> <ul style="list-style-type: none">• Covid Secure Risk Assessment in place to ensure adequate health and safety arrangements are in place for Council employees (see appended document).
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Covid Secure – Corporate Health and Safety Risk Assessments

June 2020

Blackpool Council

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Introduction

The Council takes the health and safety of employees seriously and is therefore supportive of the Government's Covid Secure guidelines. This document sets out the corporate risk assessments for managing employee's health and safety in the workplace. The corporate risk assessments have been prepared in consultation with the Health and Safety Team, Human Resources, Senior Leadership Team and Trade Unions. The risk assessment has been considered by the Extended Corporate Leadership Team and approved by the Chief Executive. The corporate risk assessment will be reviewed in light of future changes from the Government in terms of advice and guidance.

The corporate risk assessment includes an assessment of who should be in the workplace followed by specific considerations for the main areas of Council business. We recognise that the Council provides a diverse range of services and therefore reference should also be made to the full suite of government guidance where necessary which includes:

- **Construction and other outdoor work** - Guidance for people who work in or run outdoor working environments
- **Factories, plants and warehouses** - Guidance for people who work in or run factories, plants and warehouses.
- **Labs and research facilities** - Guidance for people who work in or run indoor labs and research facilities and similar environments.
- **Offices and contact centres** - Guidance for people who work in or run offices, contact centres and similar indoor environments.
- **Other people's homes** - Guidance for people working in, visiting or delivering to other people's homes.
- **Restaurants offering takeaway or delivery** - Guidance for people who work in or run restaurants offering takeaway or delivery services.
- **Shops and branches** - Guidance for people who work in or run shops, branches, stores or similar environments.
- **Vehicles** - Guidance for people who work in or from vehicles, including couriers, mobile workers, lorry drivers, on-site transit and work vehicles, field forces and similar.

All of which can be access using the following link: <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19> .

There is specific guidance in place for schools and social care and these should be applied for employees who work in these environments.

Every Head of Service needs to assess and manage the risks of COVID-19 in their service areas based on the corporate risk assessments but tailored to the needs of their service. Heads of Service will need to consider the risks their teams face and do everything reasonably practicable to minimise them, recognising that we cannot completely eliminate the risk of COVID-19. Heads of Service will listen and talk to their teams about the work and how to manage risks from COVID-19. The employees who do the work are often the best people to understand the risks in the workplace and will have a view on how to work safely. Heads of Service should also consult with the health and safety representative selected by recognised trade unions where required.

The risk assessment included in this document serves as a starting point to help inform your decisions and control measures and should complement and sit alongside the usual work activity risk assessments in place.

If employees have any concerns about their health and safety they should speak to their line manager in the first instance. Managers can access advice and support from the Council's health and safety team to consider mitigating controls which services may reasonably be able to put in place. Employees are also able to raise concerns to their trade union representatives if required.

Blackpool Council Risk Assessment – Who should be in the workplace

Directorate: Corporate

Date of Assessment – May 2020

Section: Corporate

Assessment Team: Extended Corporate Leadership Team

Location: All Council Locations

Assessment Activity / Area / Type: Covid-19 Secure

Do the hazards create a business continuity risk? Yes

Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers
Employees working from home on a temporary basis	Everyone should work from home, unless they cannot work from home	Employees	<ul style="list-style-type: none"> Staff should continue to temporarily work from home where they can undertake their role from home. Staff provided with guidance relating to temporary homeworking. As the home working arrangements are temporary there is no need to complete a DSE assessment but staff will be encouraged to complete a checklist and send this to their managers and the Council will take reasonable steps to manage DSE risks, such as the provision of some equipment e.g. adapted chairs if necessary. An iPool course for Remote Working for Managers is available. A corporate support package for health and wellbeing is available. 	3	2	6	<ul style="list-style-type: none"> How will you monitor the wellbeing of people who are working from home and help them stay connected to the rest of the workforce such as virtual one to ones, phone calls, Microsoft Teams etc...?

			<ul style="list-style-type: none"> • Mental Health First Aider and Wellbeing Champions in place. • Remote access to work systems is provided. • Employees FAQ are in place which cover home working. • Corporate health and safety documentation is in place. 				
Staff returning to the workplace	To support staff who are returning to the workplace after a period of homeworking / furloughed or redeployment.	Employee	<ul style="list-style-type: none"> • A corporate support package for health and wellbeing is available. • All services to have a Covid Secure risk assessment in place developed in conjunction with employees. 	3	2	6	
Clinically extremely vulnerable employees	To protect clinically extremely vulnerable individuals	Employees	<ul style="list-style-type: none"> • Employees who are extremely clinically vulnerable and have received a 'shielding' letter from the NHS must not come to work but should work from home wherever possible. • A corporate support package for health and wellbeing is available. • Mental Health First Aider and Wellbeing Champions in place. 	2	4	8	<ul style="list-style-type: none"> • How will you keep in touch with your employee to keep them up to date and support their mental health and wellbeing? • Have you completed an employee risk assessment for the individual?
Clinically vulnerable employees	To protect clinically vulnerable individuals	Employees	<ul style="list-style-type: none"> • Any employee in the clinically vulnerable group must 'take care' but are not in the shielded group. This means that they could attend work providing appropriate health and safety arrangements are in place. • Managers will listen to any concerns raised by employees 	2	3	6	<ul style="list-style-type: none"> • How will you keep in touch with your employee to keep them up to date and support their mental health and wellbeing? • Have you completed an employee risk assessment for the individual?

			<p>and address them in a risk assessment.</p> <ul style="list-style-type: none"> • A corporate support package for health and wellbeing is available. • Mental Health First Aider and Wellbeing Champions in place. 				
<p>Employees living with someone in the extremely clinically vulnerable group</p>	<p>To protect employee's family</p>	<p>Employees family</p>	<ul style="list-style-type: none"> • Where an employee lives with someone who is in the extremely clinically vulnerable group all options for working at home will be considered (including redeployment if practicable). • If the employee cannot work from home very careful consideration will be given before asking them to attend work and this should only be considered in situations where there are staff shortages in critical/essential services which cannot be covered in other ways. It is important in these situations that managers ascertain and address the employees concerns. • The Council has a duty of care and must ensure a risk assessment is undertaken which ensures the Council is doing everything possible to mitigate risk of the employee 'taking the virus home' to their vulnerable relative. This may mean 	<p>2</p>	<p>3</p>	<p>6</p>	

			alternative accommodation is provided.				
Covid-19 symptoms or live in a household with someone showing symptoms	To make sure individuals who are advised to stay at home under existing government guidance do not physically come to work. This includes individuals who have symptoms of COVID-19 as well as those who live in a household with someone who has symptoms	Employees	<ul style="list-style-type: none"> • Corporate guidance on accessing testing has been issued. • Corporate process in place for recording and managing employees who have reported symptoms or living with someone with symptoms. • Employee FAQs in place making it clear that you should not come into work if you have symptoms or if someone in your house has symptoms and the government timescales for return must be adhered to. 	3	2	6	<ul style="list-style-type: none"> • Can you enable workers to work from home while self-isolating if appropriate? • How will you ensure that staff who need to self-isolate do self-isolate and don't attend the workplace? • How will you ensure an employee who tests negative is well enough to return particularly to a frontline role? • How will you ensure that where an employee tested positive, they do not return for minimum 7 days and that for at least 2 days their temperature has returned to normal?

Everyone is treated fairly , according to known risks	To treat everyone in your workplace equally	Employees	<ul style="list-style-type: none"> • Senior Equality and Diversity Advisor in place to provide advice and support. • Equality training in place. • Employee over the age of 70 fall under the clinically vulnerable category and risks will be managed through the application of the government guidance. • Black, Asian and minority ethnic (BAME) communities are believed to be disproportionately affected by COVID-19. The Council encourages line managers and BAME staff to have sensitive and comprehensive conversations about this and where necessary undertake a risk assessment. • Disabled staff working across the Council manage their disability through the application of reasonable adjustments. If additional control measures are required a risk assessment will be undertaken. • Pregnant women fall under the clinically vulnerable category and risks will be managed through the application of the government guidance. • The ongoing pandemic will coincide with religious events. 	2	2	4	Have you completed an employee risk assessment for the individual?
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			The Council will consider the need for employees to be able to take time to conduct spiritual/religious reflection away from the frontline.				
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Blackpool Council Risk Assessment – Social Distancing

Directorate: Corporate	Date of Assessment – May 2020
Section: Corporate	Assessment Team: Extended Corporate Leadership Team
Location: All Council Locations	
Assessment Activity / Area / Type: Covid-19 Secure	

Do the hazards create a business continuity risk? Yes							
Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers

Social Distancing

Coming to work and leaving work	To maintain social distancing wherever possible, on arrival and departure and to ensure handwashing upon arrival	Employees	<ul style="list-style-type: none"> Many employees are on the flexible working scheme which helps stagger the arrival and departure time therefore reducing overcrowding at entry and exit points. A staff parking scheme is in place which enables employees to choose where to park their car. Where possible the number of passengers in Council fleet vehicles used for transporting employees to and from work will be limited. Employee car sharing for journeys to and from work will be discouraged. Employees will be encouraged to use their own transport to travel to work, walk or cycle. 	3	2	6	<ul style="list-style-type: none"> Where your employees are not on the flexible working scheme can you stagger arrival and departure times? Do you need to provide additional facilities such as bike-racks to help people walk, run, or cycle to work where possible? Do you need to provide more storage for employee's clothes and bags? Are you able to provide handwashing facilities, or hand sanitiser where not possible, at entry and exit points?
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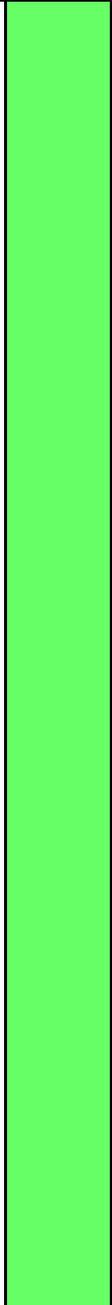
			Property Services will introduce one-way systems at entry and exit points wherever feasible and clearly signposted.				<ul style="list-style-type: none"> • Are you able to provide alternatives to touch-based security devices such as keypads? • Can you assign fixed groups of workers to the same transportation routes where sole travel is not possible?
Moving around the workplace	To maintain social distancing wherever possible while people travel through the workplace	Employees	<ul style="list-style-type: none"> • Employees will be encouraged to use the telephones / Microsoft Teams rather than making non-essential trips. • One way systems will be introduced where possible with signage or ground markings used. • Employees will be advised to use the stairs where possible and the maximum occupancy for lifts will be recommended to be one person at a time. • Employees will be advised to minimise unnecessary movement to reduce congestion in high traffic areas such as corridors and walkways. • The number of people in attendance at site inductions will be reduced and these will be held outdoors where possible. 	4	2	8	<ul style="list-style-type: none"> • Can you reduce job, equipment and location rotation? • Is it possible to separate sites into working zones to keep different groups of workers physically separated as much as practical? • Are you able to reduce the number of workers at base depots at a given time based on minimum operational safety requirements? • Can you use staff cohorts / social bubbles to reduce potential spread across staff?

			<ul style="list-style-type: none"> Where possible times will be scheduled for the collection of goods to avoid overcrowding. 				
Moving around when working in a resident's home	To maintain social distancing wherever possible while performing work in a residents home	Employees	<ul style="list-style-type: none"> Employees will be encouraged to discuss with households ahead of a visit to ask that a 2 metre distance is kept from those working and ask that all internal doors are open. Employees should, where possible avoid busy areas in the house such as stairs and corridors. 	4	2	8	<ul style="list-style-type: none"> If it is not possible to maintain social distancing while working in a home then does PPE need to be considered? Can you use a fixed pairing system if people have to work in close proximity or attend a household on a regular basis? Can you use staff cohorts / social bubbles to reduce potential spread across staff?
Making the main workplace safe for people who work statically	To maintain social distancing between people who work in one place	Employees	<ul style="list-style-type: none"> Where possible layouts will be changed to allow people to work further apart from each other where this is not possible people will work side by side or facing away from each other rather than face to face. Where social distancing is not possible due to service requirements, consideration of desk screens between and to the front of desks will be considered. 	2	2	4	<ul style="list-style-type: none"> Can you use a consistent pairing system if people have to work in close proximity? Can you reduce the use of rota's? Can you use staff cohorts / social bubbles to reduce potential spread across staff?

Desk Spaces	To maintain social distancing between individuals when they are at their workstations	Employees	<ul style="list-style-type: none"> • Government guidance states that if you can work from home you should work from home. • Only staff who must be in the office to perform their role will be introduced back to the office initially. A desk ratio of 1 in 4 desks will initially be introduced in the main Council offices (Bickerstaffe House, Municipal Buildings, South King Street and Clifton Street) to enable a minimal number of staff to return to the work place based on business needs. On banks of 6 desks this may initially be a 1 in 3 desk ratio to avoid only 1 person being in from a team. • Once the Corporate Leadership Team is confident that the social distancing measures in the building are working effectively the desk ratio will be extend to 1 in 3 desks to enable managers the flexibility to introduce more staff into the office where there is a business need. • The Corporate Leadership Team will determine when it is feasible to move to a desk ratio of 1 in 2 desks based on the Government's Recovery Strategy and phased approach. • Managers will need to manage this via a rota system based on 	2	2	4	<ul style="list-style-type: none"> • Is it feasible to allocate desks rather than use hot desking in your allocated areas? • Are rota's required or can you manage your employees differently? • Can you use staff cohorts / social bubbles to reduce potential spread across staff? • Can staff use the Jabber app on their personal mobile phone rather than using desk based phones?
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their existing desk allocation. If this is not feasible due to staff needing to be in the office to do their job then this should be escalated to the Corporate Leadership Team to identify additional capacity to enable employees to work safely.

- Employees should not work in other teams areas unless this has been previously approved by the Corporate Leadership Team to reduce the sharing of desks.
- Property Services will place signs on the desks which can be used to ensure that these adhere to social distancing guidance i.e. not face to face / adequate space for access.
- Property Services will arrange for signage to be in place throughout these buildings reminding staff of the need to socially distance.
- In satellite offices managers are encouraged to apply the same desk ratio principle however where this is not feasible Property Services will install desk screens and where possible staff should sit side by side rather than facing each other.
- Employees should clean their desks, telephones, keyboards,



			<p>chair arms and chair adjustment levers using the provided disinfectant wipes of arrival and departure from the workstation.</p> <ul style="list-style-type: none"> • Dedicated hot desking areas will be closed. 				
Meetings/ appointments	To reduce or eliminate transmission due to face-to-face meetings / appointments and maintain social distancing in meetings	Employees	<ul style="list-style-type: none"> • Remote working tools will be used as much as possible to avoid in-person meetings. • If face to face meetings do take place only absolutely essential participants should attend and maintain at least 2 metres separation throughout. • Employees will be advised to avoid sharing pens and or other objects in meetings. • If possible meetings should be held outside or in well ventilated rooms, taking into account confidentiality. • All conference rooms will be closed and the booking system stopped to avoid large gatherings of people. Should an essential meeting need to take and a larger room required to enable social distancing this should be discussed with Property Services. • Small meeting rooms will remain open however employees will be advised that these should only be used by one person at a time for the 	3	2	6	<ul style="list-style-type: none"> • If you do need to hold face to face meetings can you provide hand sanitiser in the meeting room? • If the same rooms are used regularly for meetings can you use floor markings to encourage social distancing? • Is it feasible to install a screen in regularly used meeting rooms for additional protection? • Do you need to explain social distancing measures required in meeting invites?

			purpose of participating in video calls and to clean surfaces that they touch after use.				
Common areas	To maintain social distancing while using common areas	Employees	<ul style="list-style-type: none"> • Flexible working polices allow employees to take their lunch at different times which encourages staggering to reduce pressure on break rooms or places to eat. • Employees will be encouraged to use safe outdoor areas for breaks. • Seating and tables will be reconfigured to maintain spacing and reduce face to face interactions. • Employees will be allowed to eat hot and cold food at their desks. • Employees will be discouraged from making drinks for each other and bringing in food to share e.g. cakes. • Property Services will work collaboratively with landlords and other tenants in multi-tenant sites/buildings to ensure consistency across common areas, for example, receptions, staircases. • Screens will be installed in public reception areas by Property Services as required. • Employees are encouraged to bring their own food to work, 	4	2	8	<ul style="list-style-type: none"> • Where staff are on fixed hours are you able to stagger break times to reduce pressure on break rooms? • Is it possible to create additional space for breaks by using other parts of the workplace freed up by remote working? Where toilet facilities are too small to allow more than one person in whilst maintaining social distancing, does there need to be consideration of a one in/one out system with something on the door to indicate if it is in use or not?

			<p>and when not possible maintain social distancing while off site.</p> <ul style="list-style-type: none"> • Guidance will be provided to employees on the use of locker rooms, changing areas and other facility areas to reduce concurrent usage. • Employees will be encouraged to store personal items and clothing in personal storage spaces such as lockers. • Employees will be encouraged to maintain social distancing as far as possible when using the toilet facilities. • Signage to be placed in toilet areas reminding employees about hand washing. • Property Services will arrange for paper towels to be available in toilet facilities including access to a bin to dispose of the waste and regular collection of the waste. 				
<p>Accidents, security and other incidents</p>	<p>To priorities safety during incidents</p>	<p>Employees</p>	<ul style="list-style-type: none"> • In an emergency, for example, an accident, fire, break-in or trespass, people do not have to stay 2 metres apart if it would be unsafe. • Employees involved in the provision of assistance to others should pay particular attention to sanitation measures immediately afterwards, including washing hands. 	<p>2</p>	<p>2</p>	<p>4</p>	

First aid in the workplace	To priorities safety during incidents	Employees	<ul style="list-style-type: none"> Managers should advise Property Services if trained first aiders will not be reporting to the main Council buildings so that steps can be taken to ensure adequate first aid provision. Managers of satellite offices should ensure adequate first aid provision is available. Property Services will ensure that first aid boxes include resuscitation face shields, disposable face masks and disposable gloves for staff administering first aid to use. 	2	2	4	
Page 31 Fire Wardens in the workplace	To priorities safety during incidents	Employees	<ul style="list-style-type: none"> Managers should advise Property Services if trained fire wardens will not be reporting to the main Council buildings so that steps can be taken to ensure adequate provision. Managers of satellite offices should ensure adequate fire warden provision is available. Premise manager / line manager / fire marshal to ensure that fire wardens can operate / understand fire panels. Toolbox talks available for all employees on fire. Employees to ensure they follow the Council's policy of 'Get out and Stay out'. 	2	2	4	<ul style="list-style-type: none"> Do you need to review your fire evacuation procedures and fire risk assessment in light of changes implemented due to Covid Secure compliance? Can additional fire wardens be trained to act as deputies on primary and secondary escape routes?

Blackpool Council Risk Assessment – Managing Customers, Visitors and Contractors

Directorate: Corporate

Date of Assessment – May 2020

Section: Corporate

Assessment Team: Extended Corporate Leadership Team

Location: All Council Locations

Assessment Activity / Area / Type: Covid-19 Secure

Do the hazards create a business continuity risk? Yes

Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers
Manage visitors, customers and contractors	To minimise the number of unnecessary visits to the workplace	Employees	<ul style="list-style-type: none"> Remote working tools will be used as much as possible to avoid onsite visits. Where site visits are required, site guidance on social distancing and hygiene will be explained to visitors on or before arrival. Employees will be encouraged to limit the number of visitors and prearranged time slots will be considered where appropriate. A record of all visitors will be maintained. 	4	2	8	<ul style="list-style-type: none"> Can schedules for essential services, deliveries and contractor visits be revised to reduce interaction and overlap between people, for example, carrying out services at night? Can electronic visitor records be kept? Can security be used to manage the flow of visitors into a reception area? Can you have appointment based visits only so that numbers of customers can be controlled given the reduced numbers of front facing staff allowed into the

							offices with services to manage their own operation of appointment systems to fit their need but with other options for customer contact available so no-one is disadvantaged?
Providing and explaining available guidance	To make sure people understand what they need to do to maintain safety	Employees	<ul style="list-style-type: none"> • Signage will be placed in all reception points providing guidance on social distancing and hygiene. • Where possible Property Services will review entry and exit routes for visitors and contractors to minimise contact with other people. • Property Services will coordinate and work collaboratively with landlords and other tenants in multi-tenant sites. • Signage will be placed in vehicles providing guidance on social distancing and hygiene. • Signage will be placed at entrances to worksites to remind the public and workers to maintain social distancing where possible. 	4	2	8	<ul style="list-style-type: none"> • Can you provide advice to visitors before they attend via phone, on the website or by e-mail? • Do you need to provide specific Covid-19 training to employees who host visitors?

Blackpool Council Risk Assessment – Personal Protective Equipment (PPE) and Face Coverings

Directorate: Corporate

Date of Assessment – May 2020

Section: Corporate

Assessment Team: Extended Corporate Leadership Team

Location: All Council Locations

Assessment Activity / Area / Type: Covid-19 Secure

Do the hazards create a business continuity risk? Yes

Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers
Personal Protective Equipment	To ensure employees can access PPE if required for their role	Employees	<ul style="list-style-type: none"> Where employees are already using PPE in their work activity to protect against non-COVID-19 risks, they should continue to do so. When managing the risk of COVID-19, additional PPE beyond what is recommended by PHE, is not beneficial and therefore is not considered a requirement. 	2	2	4	<ul style="list-style-type: none"> Have you referred to the Government Guidance to establish what PPE may be required to prevent the risk of Covid-19 in roles such as the care sector?
Face Coverings	To ensure that employees who choose to wear a face covering do so safely	Employees	<ul style="list-style-type: none"> There is no requirement for the Council to provide face coverings but if an employee chooses to use one they will be allowed to where possible. 	2	2	4	<ul style="list-style-type: none"> If your employees choose to wear face coverings can you signpost them to the guidance on how to do this safely?

Blackpool Council Risk Assessment – Cleaning the Workplace

Directorate: Corporate	Date of Assessment – May 2020
Section: Corporate	Assessment Team: Extended Corporate Leadership Team
Location: All Council Locations	
Assessment Activity / Area / Type: Covid-19 Secure	

Do the hazards create a business continuity risk? Yes

Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers
Before reopening	To make sure that any site or location that has been closed or partially operated is clean and ready to restart	Employees	<ul style="list-style-type: none"> Property Services will check to determine if there is a need to service or adjust ventilation systems in line with occupancy levels in Council buildings. If possible windows and doors will be opened frequently to encourage ventilation. Risk assessments for work sites that have been closed will be updated before restarting work. Any required cleaning will be carried out. 	2	2	4	
Keeping the workplace clean	To keep the workplace clean and prevent transmission by touching contaminated surfaces	Employees	<ul style="list-style-type: none"> Property Services will ensure the frequent cleaning of Council buildings including door handles, lift buttons and communal areas etc... Property Services will provide desk wipes and employees should wipe the phone, keyboard, chairs arms, chair adjustment levers and desk before and after use. 	3	2	6	<ul style="list-style-type: none"> Can your team be provided with their own mouse and keyboard which they can put away at the end of the day?

			<ul style="list-style-type: none"> • Clear desk policy in place. • Employees will be encouraged to have only essential items on desks e.g. not to put photos out etc. • Employees will be encouraged to limit the use of high-touch items such as printers and whiteboards and wipe them using a desk wipe after use. • Employees will be advised to sanitise all hand tools, controls, machinery, fuel pumps, vehicle keys, vehicle doors and equipment after use. • Employees will be encouraged to wipe down kitchen facilities after use such as water dispensers. • Employees will be advised to clear workspaces (including vehicles, such as steering wheels and door handles, and outdoor sites) and remove waste and personal belongings at the end of a shift. 				
Keeping the work area clean	To keep work areas in a residents home clean and prevent transmission by touching contaminated surfaces	Employees	<ul style="list-style-type: none"> • Cleaning materials will be provided for cleaning surfaces that employees may need to touch. • Employees will be encouraged to arrange methods of safe disposal with the householder. • Employees will be advised to remove waste and personal 	4	2	6	

			<p>belongings from the house at the end of the shift.</p>				
Hygiene: handwashing, sanitation facilities and toilets	To help everyone keep good hygiene through the working day	Employees	<ul style="list-style-type: none"> • Posters / communication will be in place to build awareness of good handwashing technique, the need to increase handwashing frequency, avoid touching your face and to cough or sneeze into a tissue which is binned safely, or into your arm if a tissue is not available. • Hand sanitiser will be provided in areas where there is no access to washrooms including in vehicles and to employees who work outdoors or visit resident's homes. • Property Services will ensure that toilets in Council buildings are cleaned on a regular basis and place signage to encourage social distancing as much as possible. • Property Services will ensure regular waste collection from offices and communal areas such as toilet facilities. • Employees to be encouraged to be vigilant and remind colleagues if they notice they are not handwashing. 	4	2	8	<ul style="list-style-type: none"> • How will you ensure drivers will have access to appropriate welfare facilities during their journeys? • Do you use portable toilets and if so what cleaning arrangements can you put in place? • Are you able to provide more waste facilities and more frequent rubbish collection for employees working outdoors?
Changing rooms and showers	To minimise the risk of transmission in changing rooms and showers	Employees	<ul style="list-style-type: none"> • Property Services will set clear use and cleaning guidance for showers, lockers and changing rooms to ensure they are kept clean and clear of personal 	3	2	6	

			items and social distancing is achieved as much as possible.				
Handling goods, merchandise and other materials	To reduce transmission through contact with objects that come into the workplace	Employees	<ul style="list-style-type: none"> • Employees handling goods have access to handwashing facilities or hand sanitiser. • Employees will be advised that they should not arrange personal deliveries to work. 	2	2	4	<ul style="list-style-type: none"> • Can you develop cleaning procedures for goods and merchandise entering the site?

Blackpool Council Risk Assessment – Workforce Management

Directorate: Corporate	Date of Assessment – May 2020
Section: Corporate	Assessment Team: Extended Corporate Leadership Team
Location: All Council Locations	
Assessment Activity / Area / Type: Covid-19 Secure	

Do the hazards create a business continuity risk? Yes

Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers
Shift patterns, working groups and teamwork	To change the way work is organised to create distinct groups and reduce the number of contacts each employee has	Employees	<ul style="list-style-type: none"> Employees will continue to work from home where possible to do so. Employees who work together in one vehicle should be in a fixed pairing as far as possible. Procedures will be put in place to minimise worker congestion at bottlenecks such as time clocks, entrances and exits and social distancing will be applied during shift handovers. When visiting a resident's home where possible the same worker will be allocated to the same household. 	2	2	4	<ul style="list-style-type: none"> Where staff are split into teams or shift groups can these be fixed so that where contact is unavoidable this happens between the same people? Are there any areas where people directly pass things to each other and can you remove direct contact? Where there are multiple workers in a resident's home can these be fixed so that where contact is unavoidable this happens between the same people?

Work related travel	To avoid unnecessary work travel and keep people safe when they do need to travel between locations	Employees	<ul style="list-style-type: none"> • Non-essential travel will be minimised and remote options will always be explored in the first instance. • Employees will be advised not to travel together in any one vehicle and where this is not possible mitigating actions will be taken such as using fixed travel partners, increasing ventilation and avoiding sitting face to face. • Employees will be required to clean Council fleet vehicles after use. • Where employees need to move between different homes and locations to complete their work they will be advised to follow social distancing and hygiene advice. 	3	2	6	<ul style="list-style-type: none"> • If an employee is required to stay away from home can you log the stay and ensure that any overnight accommodation meets social distancing guidelines?
Deliveries to other sites	To help workers delivering to other sites to maintain social distancing and hygiene practices	Employees	<ul style="list-style-type: none"> • Where ever possible payments and the exchange of documents will be undertaken electronically. • Employees will be reminded to wash their hands after handling. • Where a need has been identified appropriate PPE will be provided such as disposal gloves. 	3	2	6	<ul style="list-style-type: none"> • Can you put in place procedures to minimise person-to-person contact during deliveries to other sites? • Can you use consistent pairing when 2 person deliveries are required?

Returning to Work	To make sure all employees understand COVID-19 related safety procedures	Employees	<ul style="list-style-type: none"> • Heads of Services will prepare a risk assessment for their service area and will consult with employees and worker representatives as part of this process. 	4	2	8	<ul style="list-style-type: none"> • How can you ensure clear, consistent and regular communication to improve understanding and consistency of ways of working? • Do you need to develop communication and training material for employees prior to returning to work?
Ongoing communication	To make sure all workers are kept up to date with how safety measures are being implemented or updated	Employees	<ul style="list-style-type: none"> • There will be ongoing engagement with employees through team meetings and through trade unions or employee representative groups to monitor and understand any unforeseen impacts of changes to working environments. 	4	2	8	<ul style="list-style-type: none"> • Can you use methods of communication which avoid the need for face to face communication? • How will you communicate approaches and operational procedures to suppliers and customers to help adoption and to share experience?

Blackpool Council Risk Assessment – Inbound and Outbound Goods

Directorate: Corporate

Date of Assessment – May 2020

Section: Corporate

Assessment Team: Extended Corporate Leadership Team

Location: All Council Locations

Assessment Activity / Area / Type: Covid-19 Secure

Do the hazards create a business continuity risk? Yes

Hazard	Objective	Who is at Risk	Corporate Controls In Place	Likelihood	Severity	Risk Rating	Further Potential Controls for consideration by Managers
Inbound and outbound goods	To maintain social distancing and avoid surface transmission when goods enter and leave the site	Employees	<ul style="list-style-type: none"> Non-contact deliveries will be used where possible. Drivers will be encouraged to stay in their vehicles where this does not compromise their safety. Handwashing facilities or hand sanitiser will be provided. 	3	2	6	<ul style="list-style-type: none"> Can you revise pick-up and drop-off collection points, procedures and markings? Can you reduce the frequency of deliveries by ordering larger quantities less often? Can single workers load or unload vehicles or can the same pairs of people be used?

Risk Rating Matrix

Likelihood	Impact / Severity				
	1 = Not Harmful	2= Slightly Harmful	3= Harmful	4= Extremely Harmful	5= Catastrophic
1 = Improbable	1	2	3	4	5
2 = Highly Unlikely	2	4	6	8	10
3 = Likely	3	6	9	12	15
4 = Very Likely	4	8	12	16	20
5 = Almost Certain	5	10	15	20	25

Low Risk = 1-8

Medium Risk = 9-15

High Risk = 16-25

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Report to:	AUDIT COMMITTEE
Relevant Officer:	Tracy Greenhalgh, Head of Audit and Risk
Date of Decision/ Meeting	25 June 2020

ANNUAL AUDIT OPINION 2019/2020

1.0 Purpose of the report:

1.1 This report sets out the individual and collective outcomes of the audit reviews undertaken in the year ended 31 March 2020. It also provides an audit opinion on the control environment based on this audit work.

The Head of Audit and Risk's Annual Audit Opinion is one component that the Council takes into account when compiling its Annual Governance Statement.

The report also sets out the proposed programme for Heads of Service to report progress against audit recommendations to the Audit Committee based on a random sample of audits.

2.0 Recommendation(s):

2.1 To consider the annual audit report for the year ended 31 March 2020.

3.0 Reasons for recommendation(s):

3.1 The completion of an Annual Audit Opinion is a requirement of the Public Sector Internal Audit Standards and a key component when formulating the Annual Governance Statement.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

4.1 The work of Risk Services contributes to the delivery of all of the Council's priorities.

5.0 Background Information

5.1 Blackpool Council's Head of Audit and Risk is responsible for the delivery of an annual audit

opinion and report that can be used by the Council to inform its Annual Governance Statement. The annual opinion concludes on the overall adequacy and effectiveness of the organisation’s framework of governance, risk management and control. In giving this opinion, assurance can never be absolute and therefore only reasonable assurance that there are no major weaknesses in the processes reviewed can be provided. In assessing the level of assurance to be given the opinion has been given based on:

- Internal audit assurance statements issued throughout the year as part of the annual audit plan;
- Reports provided as a result of advice/consultancy work undertaken by the internal audit team;
- The implementation of recommendations made by internal audit linked to high risks throughout the year;
- The extent of resources available to deliver the annual internal audit plan;
- The quality and performance of the internal audit service and the extent to which it complies with the Public Sector Internal Audit Standards;
- Whether the target for delivery of the internal audit plan has been achieved;
- The opinions of other review bodies where appropriate.

It is intended that the Audit Committee continues to receive a sample of audit reports listed in the Annual Audit Opinion to gain assurance that all audit recommendations are implemented. The following is the timetable which will be proposed to the Audit Committee for inclusion on their work programme:

Audit Committee Date	Audit Report	Head of Service / Service Manager
24 September 2020	Advertising	Philip Welsh
30 November 2020	Post-Ofsted and YOT Inspection Governance	Kate Aldridge
4 March 2021	Business Support	Peter Legg
15 April 2021	Client Finances	Louise Jones

Does the information submitted include any exempt information?

No

List of Appendices:

Appendix 5(a) – Annual Audit Opinion 2019/2020

6.0 Legal considerations:

6.1 All work undertaken by Risk Services is in line with relevant legislation and professional standards.

7.0 Human Resources considerations:

7.1 None.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 All work has been delivered within the agreed budget for Risk Services.

10.0 Risk management considerations:

10.1 The primary role of Risk Services is to provide assurance that the Council is effectively managing its risks and providing support to all services in relation to risk and control. Where high risk areas have been identified as part of audit reviews these are subject to a follow-up process to ensure that effective controls are implemented.

11.0 Ethical considerations:

11.1 All staff in the internal audit service adhere to the Code of Ethics as set out in the Public Sector Internal Audit Standards.

12.0 Internal/ External Consultation undertaken:

12.1 The report was considered by the Corporate Leadership Team on 19 May 2020.

13.0 Background papers:

13.1 None.

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Annual Internal Audit Opinion 2019/20

Blackpool Council



Annual Internal Audit Opinion

Introduction

The Public Sector Internal Audit Standards (PSIAS) note that a professional, independent and objective internal audit service is one of the key elements of good governance, as recognised throughout the UK public sector. The role of the Head of Audit and Risk, in accordance with the PSIAS, is to provide an annual opinion, based upon (and limited to) the work performed, on the overall adequacy and effectiveness of the organisation's governance, risk management and control processes (i.e. the organisation's system of internal control). This is achieved through a risk-based plan of work, agreed with the Corporate Leadership Team and approved by the Audit Committee, which should provide a reasonable level of assurance, subject to the inherent limitations described in this report.

The CIPFA Statement on the role of the Head of Internal Audit in Local Government noted that the Head of Internal Audit in a local authority plays a critical role in delivering the authority's strategic objectives by:

- Championing best practice in governance, objectively assessing the adequacy of governance and management of existing risks, commenting on responses to emerging risks and proposed developments; and
- Giving an objective and evidence based opinion on all aspects of governance, risk management and internal control.

Roles and Responsibilities

The Head of Audit and Risk's Annual Audit Opinion does not imply that internal audit has reviewed all risks and assurances relating to the Council. The purpose of the opinion is to contribute to the assurances available to the Council which underpin the Council's own assessment of the effectiveness of the organisation's governance arrangements and system of internal control. The Head of Audit and Risk's opinion is one component that the Council takes into account when compiling its Annual Governance Statement. In particular, apart from the overall opinion, where limited or inadequate assurance opinions have been issued against individual audits, or where critical or high risk priority recommendations have been made in consultancy reviews, then the Council should assess whether or not the sources of those opinions / recommendations necessitate the need for a disclosure of a significant issue.

The Council is accountable collectively for maintaining a sound system of internal controls and is responsible for putting in place arrangements for gaining assurance about the effectiveness of that overall system. The Annual Governance Statement is an annual statement by the Council setting out:

- How the responsibilities of the Council are discharged, with regard to maintaining a sound system of internal control that supports the achievement of policies, aims and objectives;
- The purpose of the governance arrangements as evidenced by a description of the risk management and review processes; and
- The conduct and results of the review of effectiveness of the system of internal control, including any disclosures of significant control failures, together with assurances that actions are or will be taken where appropriate to address issues arising.

Annual Internal Audit Opinion

The Council's framework of assurance should bring together all of the evidence required to support the Annual Governance Statement.

Head of Audit and Risk Opinion

The Head of Audit and Risk Annual Audit Opinion is that:

Annual Audit Opinion 2019/20

The Head of Audit and Risk is satisfied that sufficient assurance work has been carried out to allow the provision of a reasonable conclusion on the adequacy and effectiveness of Blackpool Council's internal control environment.

The opinion of the Head of Audit and Risk is that the overall control environment of the Council is adequate, however recognises that there are significant issues faced by Children's Services as identified in the OFSTED report and ongoing overspends which need to be addressed.

The Covid-19 pandemic also impacted on the control environment in March 2020 and this will continue to be monitored during 2020/21 and steps taken to manage risk as effectively as possible given the challenging circumstances.

Where weaknesses have been identified through internal audit work the team has worked with management to agree appropriate remedial actions and a timescale for improvement. This is particularly relevant in high risk areas where innovative solutions are being implemented to support the future sustainability.

Basis of the Opinion

Blackpool Council's Head of Audit and Risk is responsible for the delivery of an annual audit opinion and report that can be used by the Council to inform its Annual Governance Statement. The annual opinion concludes on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control. In giving this opinion assurance can never be absolute and, therefore, only reasonable assurance that there are no major weaknesses in the processes reviewed can be provided. In assessing the level of assurance to be given the opinion has been given based on:

- Internal audit assurance statements issued throughout the year as part of the annual audit plan.
- Reports provided as a result of advice / consultancy work undertaken by the internal audit team.
- The implementation of recommendations made by internal audit linked to high risks throughout the year.
- The extent of resources available to deliver the annual internal audit plan.

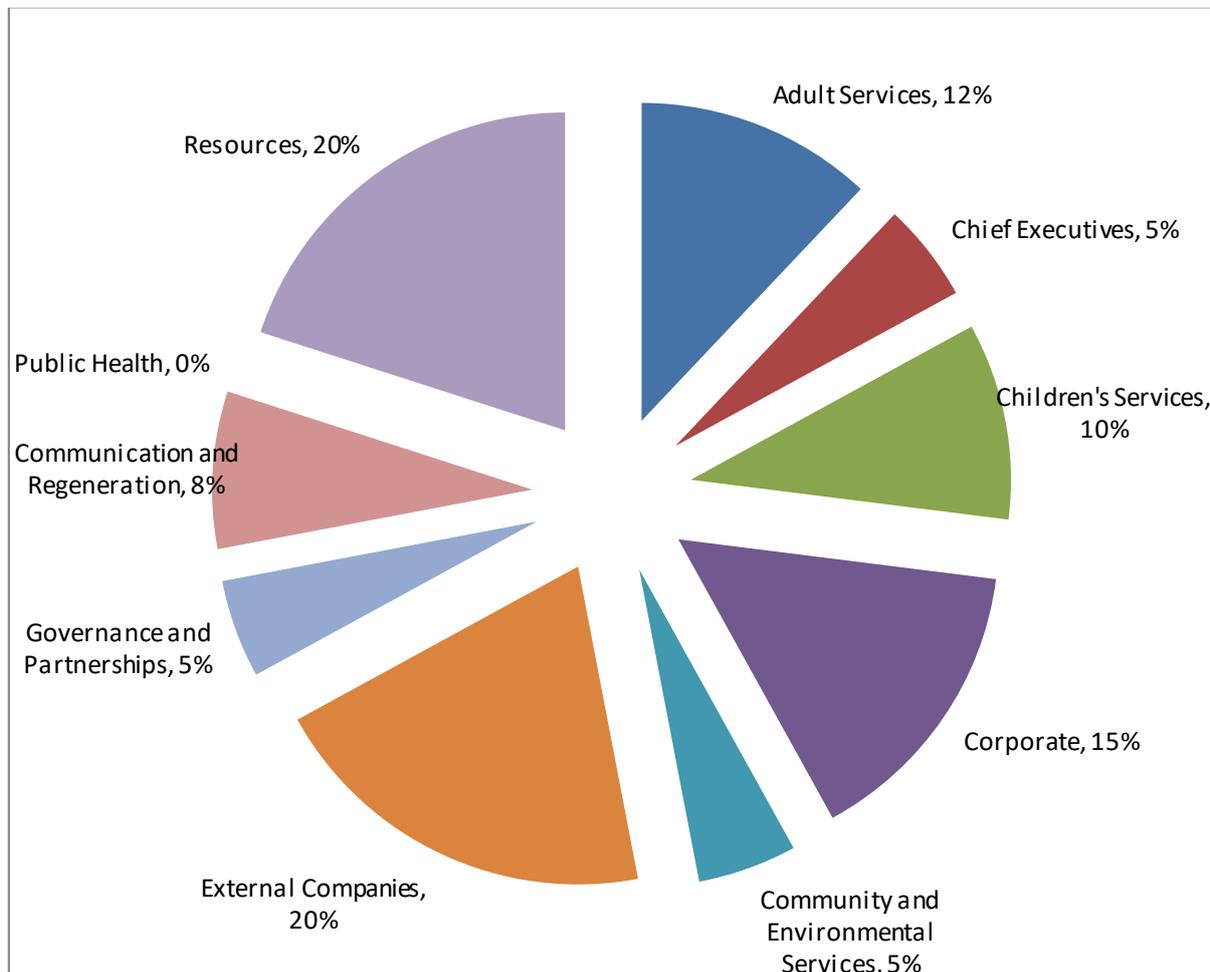
Annual Internal Audit Opinion

- The quality and performance of the internal audit service and the extent to which it complies with the Public Sector Internal Audit Standards.
- Whether the target for delivery of the internal audit plan has been achieved.
- The opinions of other review bodies where appropriate.

Internal Audit Coverage and Output

Planned Audit Work

The Annual Internal Audit Plan for 2019/20 was approved by the Corporate Leadership Team in February 2019 and Audit Committee in March 2019. The coverage of work, by directorate, for the audit plan completed, was as follows:



Annual Internal Audit Opinion

In terms of completed internal audits the level of assurance issued for each review is captured in the following table. This includes the assurance statements from reviews which were also started in 2018/19 but were not finalised until 2019/20.

Assurance Statement	Reviews
Good	<ul style="list-style-type: none"> • Housing Benefit Financial Control Assurance Testing • Carbon Reduction Commitment Scheme
Adequate	<ul style="list-style-type: none"> • Early Years Financial System • Detailed Follow-Up - Children's Payments • Transformation Fund • Payroll Financial Control Assurance Testing • Volunteers • Vitaline • Advertising • Business Support • Leisure Centres • Response to Brexit • Layton Depot Management • Organisational Culture • Corporate Governance • Creditor Payments Financial Control Assurance Testing • Housing Rents Financial Control Assurance Testing • Post OFSTED and YOT Inspection Governance • Early Help Sustainability • Client Finances • Complaints • Care at Home • Children's Homes • Moor Park Primary School • Layton Primary School • St John Vianney Primary School • Holy Family RC Primary School • Stanley Primary School
Split Assurance	<ul style="list-style-type: none"> • ICT Security and Unstructured File Store • Covert Surveillance • Coopers Way Respite Service • Extra Support Service • Managing Leavers
Inadequate	<ul style="list-style-type: none"> • Growth and Prosperity • Direct Payments • Compliance with Corporate Arrangements

Annual Internal Audit Opinion

Assurance Statement	Reviews
	<ul style="list-style-type: none"> Contract Management and Social Value Non-Contracted ICT Software Water Self Supply
Uncontrolled	<ul style="list-style-type: none"> -

Any high risk areas identified in the year are given a priority one recommendation which is followed up by the Head of Audit and Risk. Where there is a failure to implement such a recommendation by the due date, without reasonable justification, a formal process of notification to the Corporate Leadership Team and Audit Committee is in place.

Planned internal audit work for 2019/20 which has not been undertaken after discussion with management is outlined below:

Review	Reason for Deferment
Homelessness	<ul style="list-style-type: none"> A scrutiny review of homelessness took place and therefore the internal audit was not undertaken to avoid duplication.
Conference Centre	<ul style="list-style-type: none"> Given the ongoing challenges with the construction of the conference centre it was not considered the appropriate timing for an internal audit.
Children's Legal Services	<ul style="list-style-type: none"> Management requested that this audit was deferred to a future year due to an ongoing restructure in the service.
Fostering	<ul style="list-style-type: none"> Management advised that an external review of the service would be undertaken and therefore the internal audit was not undertaken to avoid duplication.

The Head of Audit and Risk does not consider this change to the plan to have an adverse impact of the delivery of the overall opinion for the period.

There is also some planned audit work for 2019/20 which is still at fieldwork / draft report stage as these have yet to be discussed with management, however the Head of Audit and Risk does not consider that excluding these will have a negative impact on the overall opinion for the period. The reports included in this category are:

- Bispham Endowed Primary School
- Information Governance
- Council Tax
- Wedding Chapel
- Election Process
- Commissioning

Annual Internal Audit Opinion

-
- CCTV
 - Flood Management
 - Opportunity Area Funding
 - Parking Services
 - Troubled Families
 - Research and Data Analysis
 - Adult Services - Executive Decisions

Unplanned Audit Work – Advice and Consultancy

Throughout the year internal audit has been asked to provide advice and consultancy on a range of risk and control issues. The key areas where advice has been given include:

Advice	Outcome
Use of Safes	<ul style="list-style-type: none">• Advice on the use of safes and strong rooms and the adequacy of these.
Channel Shift Scrutiny	<ul style="list-style-type: none">• Participation in the Channel Shift scrutiny working group to provide advice based on internal audit findings.
Children’s Homes	<ul style="list-style-type: none">• Advice provided on financial controls.
Use of E-selling Sites	<ul style="list-style-type: none">• Advice provided on ensuring adequate controls when using on-line selling sites.
Employee Travel Loans	<ul style="list-style-type: none">• Advice provided on how to strengthen controls to avoid the risk of fraud.
Financial Procedures	<ul style="list-style-type: none">• Advice offered in relation to temporary changes of financial limits for authorising expenditure and write-offs.

The Head of Audit and Risk has also participated in a number of corporate groups and initiatives throughout the year in order to provide support and advice on a variety of risk and controls issues. These include:

- Corporate Regulation of Investigatory Powers Act (RIPA) Group
- Senior Leadership Team
- Good Governance Group
- Income and Debt Strategy Group
- Stage Three Complaints Panel
- Lancashire Waste Partnership Group
- Brexit Task and Finish Group
- Property Lockdown Procedures Task and Finish Group

Annual Internal Audit Opinion

-
- Refuse Insourcing Project Group
 - HR and Finance System Replacement Project Board
 - Covid-19 Incident Response

Other Sources of Assurance

We have liaised during the year with External Audit to ensure that we avoid unnecessary duplication and use resource to the best effect.

Where shared services are in place, particularly where we host a service for Fylde Borough Council, a joint approach to internal audit is in place, which makes best use of resource and experience as the auditors from both organisations work together. Similar joint working arrangements are in place with Merlin's Internal Audit Team, who operates a number of key leisure sites across the town.

Internal audit has continued to take into account other forms of assurance received by the Council. When preparing the audit plan and when undertaking individual reviews we will assess other sources of information available to us. Steps are also taken to link the work of Internal Audit to the strategic risk register.

Risk Management

A key element of the control environment at the Council is ensuring that risk management is effectively embedded. A Risk Management Framework 2018/2021 is in place which sets out the Council's policy and objectives in relation to risk management and the framework which is to be adopted.

A number of risk management groups, thematic or at directorate level, have been established, all of which are supported by the Head of Audit and Risk or nominated staff in Audit and Risk Services. These include:

- Corporate Risk Management Group
- Central Support Services Risk Management Group
- Children's Services Risk Management Group
- Adult Services Risk Management Group
- Communication and Regeneration Risk Management Group
- Community and Environmental Risk Management Group
- Driving at Work Risk Management Group
- Property Risk Management Group
- Safety Advisory Group
- Highways Risk Management Group
- Emergency Planning Risk Management Group
- Equalities Risk Management Group

Annual Internal Audit Opinion

Governance Framework

A Good Governance Group is established, chaired by the Director of Governance and Partnerships and supported by the Head of Audit and Risk and other Heads of Service charged with governance. The Group leads on the production of the Annual Governance Statement and undertook a mid-year review of progress on identified actions, which was reported to Audit Committee.

The Group is also raising awareness of the need for good and consistent application of the governance framework and are advocating the need for all services to ensure compliance with agreed mandatory arrangements across the Council.

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Report to:	AUDIT COMMITTEE
Relevant Officer:	Tracy Greenhalgh, Head of Audit and Risk
Date of Meeting	25 June 2020

RISK SERVICES QUARTER FOUR REPORT

1.0 Purpose of the report:

1.1 To provide the Audit Committee with a summary of the work completed by Risk Services in quarter four of the 2019/2020 financial year.

2.0 Recommendation(s):

2.1 To consider and note a summary report of the work completed by Risk Services in quarter four of the 2019/2020 financial year.

3.0 Reasons for recommendation(s):

3.1 To ensure that the Council has effective risk management processes in place.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

4.1 The work of Risk Services contributes to the delivery of all of the Council's priorities.

5.0 Background Information

5.1 Each quarter the Head of Audit and Risk produces a report summarising the work of Risk Services and this includes the overall assurance statements for all audit reviews completed in the quarter.

The Risk Services Quarterly Report has been reported to the Corporate Leadership Team prior to being presented to the Audit Committee.

On the completion of each audit an overall assurance statement is provided which summarises the strength of controls in the area being audited. The opinions can provide

positive assurance, such as when controls are identified to be good or adequate, or negative assurance when the controls are considered to be inadequate or uncontrolled.

Does the information submitted include any exempt information?

No

List of Appendices:

Appendix 6(a) - Risk Services Quarter Four Report.

6.0 Legal considerations:

6.1 All work undertaken by Risk Services is in line with relevant legislation. This is particularly important when undertaking fraud investigations where a number of regulations need to be adhered to.

7.0 Human Resources considerations:

7.1 None.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 All work has been delivered within the agreed budget for Risk Services.

10.0 Risk management considerations:

10.1 The primary role of Risk Services is to provide assurance that the Council is effectively managing its risks and to provide support to all services in relation to risk and control. Risks that have been identified in the quarter are reported in the summary report.

11.0 Ethical considerations:

11.1 None.

12.0 Internal/ External Consultation undertaken:

12.1 The Risk Services Quarterly Report was approved by the Corporate Leadership Team on 5 May 2020.

13.0 Background papers:

13.1 None.

Risk Services Quarter Four Report 1st January to 31st March 2020

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Blackpool Council: Risk Services

Quarter Four Summary

Service Developments

1.1 Internal Audit

Internal audits that have been scoped in the quarter and/or fieldwork underway include:

Directorate	Internal Audits
Adult Services	<ul style="list-style-type: none">Executive Decisions
Children's Services	<ul style="list-style-type: none">Troubled Families ComplianceBispham Endowed Primary SchoolOpportunity Area Funding
Chief Executives	<ul style="list-style-type: none">Commissioning (currently paused until further notice)Research and Data Analysis (currently paused until further notice)
Communication and Regeneration	<ul style="list-style-type: none">Parking Services
Community and Environmental	<ul style="list-style-type: none">Flood ManagementCCTV
Governance and Partnerships	<ul style="list-style-type: none">Wedding ChapelInformation GovernanceElection Process (currently paused until further notice)
Resources	<ul style="list-style-type: none">Council Tax Financial Control Assurance Testing

Details of the scope and final outcome for each of the above audits will be reported to Audit Committee in the Risk Services quarterly report once the fieldwork has been completed and draft report agreed.

Internal audit work has been paused in the short term as the Council dedicates its resources to responding to the Covid-19 incident. However, plans are being developed to determine how to reintroduce the internal audit programme using remote methods of auditing.

1.2 Corporate Fraud

The focus of the team's proactive work in the quarter has predominately been on the coordination and delivery of the National Fraud Initiative, with 100% of the high risk data matches having been completed by 31st March 2020.

In order to assess the fraud risk faced by the Council and to inform the proactive work programme, a risk assessment has been undertaken. The revised Fraud Charter and Proactive work programme for 2020/21 was approved by the Audit Committee in March 2020.

The Senior Corporate Fraud Advisor participated in a CIPFA Counter Fraud Centre research project survey, which resulted in the publication of "*Tackling Fraud in the Public Sector – a Local Government Perspective*". In summary, the survey found that:

- 64% considered fraud to be a major problem for Local Authorities
- 52% considered fraud to be increasing
- 45% considered that fraud levels were under-reported
- 34% considered fraud losses in Local Authorities to be high
- 10% thought their organisation lost a lot through fraud

The key themes emerging from the research were in the areas of developing a robust culture, the benefits and challenges associated with digital technology, making better use of resources through working together and information sharing, and the pivotal role of internal controls in fraud prevention.

Blackpool Council: Risk Services

The Senior Counter Fraud Advisor has been supporting the Head of Revenues and Exchequer Services in the administration of the Grant Funding Schemes as part of the response to COVID-19.

1.3 ***Risk and Resilience***

A quotation exercise was undertaken to commission an actuarial review of the insurance reserves, and the successful bidder will begin the exercise in the new financial year.

The Council's claim handlers, Gallagher Bassett, delivered a well-received Volunteer Risk Management training course to Council staff responsible for engaging and working with volunteers.

Work has been undertaken to understand the new alternative insurance provision being offered by the Department for Education to maintained schools across the Authority. There are concerns that schools moving to the new provision may not fully understand the offer and this may lead to gaps in cover.

The team, along with members of ICT, met with Cyber insurance experts to understand the complexities of cover and to ensure that an effective response can be provided by insurers to this high profile risk.

All insurance policies have been renewed for the forthcoming period. This proved challenging given the hardening market across the insurance sector, and the Council's risk profile.

The team has been undertaking extensive work in relation to COVID-19; ensuring that business continuity plans for all services are up to date and fit for purpose, preparing a risk register and ensuring that insurance and risk management considerations are explored, confirmed and communicated across the Council.

1.4 ***Health and Safety***

The team have completed one health and safety management system audit in the quarter including for the Organisation and Workforce Development team.

The team have been supporting the Council's response to the Covid-19 incident through preparing relevant risk assessments and providing health and safety advice and support to managers.

The team are also meeting with stakeholders to discuss the review of the corporate arrangements to ensure that the revisions reflect what the Council has in place, prior to sign-off and launch. All corporate Guidance Notes have been reviewed and uploaded onto the Hub.

All planned corporate training has been delivered. Additionally, all requested ad hoc training has been completed and this is an area that seems to be growing due to the team's flexibility of arranging dates and times that can meet service needs.

1.5 ***Equality and Diversity***

The compliance assessment of Children's Services with the Public Sector Equality Duty has been finished. A report summarising the results and key learning across all Council departments has been prepared. In the next financial year work will focus on delivering the programme with the Council's wholly owned companies.

Support is being provided as part of the corporate effort to advise Directors on how to ensure that the equality impact of emergency Covid-19 decisions is adequately considered.

Blackpool Council: Risk Services

Performance

Risk Services performance indicators

Performance Indicator (Description of measure)	2019/20 Target	2019/20 Actual
Professional and technical qualification as a percentage of the total.	85%	72%

Internal Audit Team performance indicators

Performance Indicator (Description of measure)	2019/20 Target	2019/20 Actual
Percentage audit plan completed (annual target).	90%	90%
Percentage draft reports issued within deadline.	96%	98%
Percentage audit work within resource budget.	92%	93%
Percentage of positive satisfaction surveys.	85%	92%
Percentage compliance with quality standards for audit reviews.	85%	93%

Risk and Resilience Team performance indicators

Performance Indicator (Description of measure)	2019/20 Target	2019/20 Actual
Percentage of Council service business continuity plans up to date.	100%	100%
Percentage of risk registers revised and up to date at the end of the quarter.	100%	15%*
Number of risk and resilience training and exercise sessions held (annual target).	6	7
Number of trained Emergency Response Group Volunteers. (for monitoring purposes only – responsibility lies with Adult Social Care)	50	33
Percentage of property risk audit programme completed (annual target).	100%	100%

*Only 15% of risk registers had been updated by the end of the quarter. Due to the on-going Covid-19 situation services have not been actively chased, however each service will have received an email reminder in late February/early March. This will be revisited in quarter one of the new financial year.

Blackpool Council: Risk Services

Health and Safety performance indicators

Performance Indicator (Description of measure)	2019/20 Target	2019/20 Actual
RIDDOR Reportable Accidents for Employees	0	9
Training Delivered to quarterly plan	100%	100%

There were three RIDDOR cases relating to employees reported in the quarter which included:

- Schools – Employee had a slip / trip fall.
- Adult Services Directorate - Employee had a road traffic collision.
- Adult Services Directorate – Employee had a road traffic collision.

Equality and Diversity performance indicators

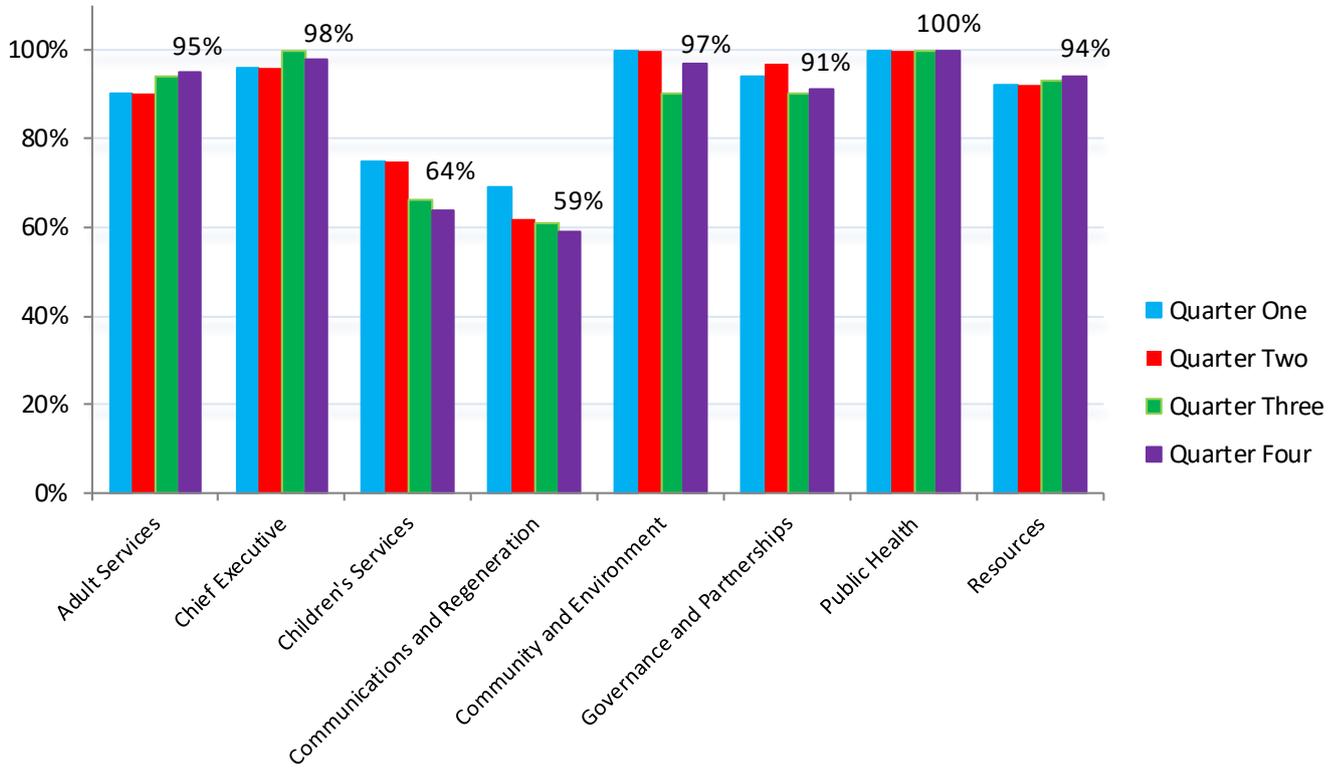
Performance Indicator (Description of measure)	2019/20 Target	2019/20 Actual
Percentage of Executive Decisions made with evidence of Equality Impact Assessments or due regard.	100%	100%
Percentage take up of Equality i-Pool course.	100%	81%

Corporate Fraud Team performance indicators

Performance Indicator (Description of measure)	2019/20 Target	2019/20 Actual
% of agreed Council employees completed i-Pool fraud awareness course.	100%	83%

This overall figure is broken down by directorate in the following graph:

Mandatory Fraud Awareness Training by Directorate



Note: The changes in both overall and directorate percentage completion rates appears to be the result of staff turnover.

Blackpool Council: Risk Services

<u>CORPORATE FRAUD</u> <u>STATISTICS - 2019/2020</u>	Number of Cases Brought Forward from 2018/19	Total Number of Referrals Received	Case Closures		Total Value of Fraud Proven / Error Identified	Action Taken on Closed Cases					Number of Cases Currently Under Investigation	
			Fraud/Error Proven	No Fraud/Error Identified		No Further Action	Recommendation	Disciplinary	Administrative Penalty	Prosecution		
Type of Fraud		ANNUAL SUMMARY 2019-20										
Council Tax - Single Person Discount	9	50	17	28	£4,220.55	45	0	0	0	0	14	
Council Tax Reduction (CTR)	3	11	2	8	£469.01	10	0	0	0	0	4	
Business Rates	0	5	0	2	-	2	0	0	0	0	3	
Procurement	1	0	0	1	-	1	0	0	0	0	0	
Fraudulent Insurance Claims	7	1	0	0	-	0	0	0	0	0	8	
Social Care	2	0	1	0	-	0	1	0	0	0	1	
Economic & Third Sector Support	0	0	0	0	-	0	0	0	0	0	0	
Gross Misconduct (Disciplinary Code)	1	4	3	0	-	0	0	3	0	0	2	
Pension	0	0	0	0	-	0	0	0	0	0	0	
Investment	0	0	0	0	-	0	0	0	0	0	0	
Payroll & Employee Contract Fulfilment	0	0	0	0	-	0	0	0	0	0	0	
Expenses	0	0	0	0	-	0	0	0	0	0	0	
Abuse of Position - Financial Gain	1	2	0	1	-	1	0	0	0	0	2	
Abuse of Position - Manipulation of Financial or Non-Financial Data	0	0	0	0	-	0	0	0	0	0	0	
General Financial Fraud	0	3	0	1	-	1	0	0	0	0	2	
Disabled parking concessions	1	3	0	2	-	2	0	0	0	0	2	
NFI 2018	82	2738	507	2,255	£261,016.74	2762	0	0	0	0	58	
Totals:	107	2817	530	2298	£265,706.30	2824	1	3	0	0	96	

2. Appendix A: Performance & Summary Tables for Quarter Four

Internal Audit reports issued in period

Directorate	Review Title	Assurance Statement								
Adult Services	Care at Home	<p><u>Scope</u></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> • Whether the purchasing portal is being used as intended and achieves its aims; • Whether information sharing is effective; • Whether social value and Care Charter commitments made by providers are being fulfilled; • Whether payments from Mosaic are prompt and accurate; • Whether providers wishing to hand back care packages to the internal care provision have had adequate support. <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" data-bbox="748 913 1466 954"> <tr> <td align="center" colspan="2">Adequate</td> </tr> </table> <p>We consider that the controls in place are adequate with some issues identified around communication and sharing of information with care providers, and the monitoring of social value commitments.</p> <p><u>Number of Recommendations Made</u></p> <table border="1" data-bbox="748 1167 1466 1279"> <tr> <td>Priority 1</td> <td align="center">0</td> </tr> <tr> <td>Priority 2</td> <td align="center">1</td> </tr> <tr> <td>Priority 3</td> <td align="center">6</td> </tr> </table> <p><u>Management Response</u></p> <p>Management agreed to address a number of recommendations at the Provider Forum, so that boundaries regarding the level of detail appropriate to provide can be discussed.</p> <p>A care plan improvement project is in place and management will monitor and assess after 6 months.</p> <p>Management agreed to monitor circumstances under which issues occur and discuss at the Provider Forum.</p> <p>Joint working with Quality Monitoring Officers will be strengthened and the Business Support Services Manager will be better engaged in performance monitoring meetings.</p>	Adequate		Priority 1	0	Priority 2	1	Priority 3	6
Adequate										
Priority 1	0									
Priority 2	1									
Priority 3	6									

<p>Children's Services</p>	<p>Children's Homes</p>	<p><u>Scope</u></p> <p>The scope of our audit work was to review two Children's Homes and undertake compliance testing on a range of operational controls.</p> <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td colspan="2">Adequate</td> </tr> </table> <p>Generally we consider that the controls in place to be adequate, with some risks identified and several changes necessary. In most areas our testing revealed minor lapses in compliance with the controls. However, there is a need to ensure medication refresher training is undertaken annually and that medication competency assessments are recorded in training logs and therefore we consider this area needs improvement.</p> <p><u>Number of Recommendations Made</u></p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td>Priority 1</td> <td>0</td> </tr> <tr> <td>Priority 2</td> <td>13</td> </tr> <tr> <td>Priority 3</td> <td>3</td> </tr> </table> <p><u>Management Response</u></p> <p>Management agreed to document the requirement for a service user file and undertake service user file reviews on a regular basis to maintain quality standards.</p> <p>A procedure/guidance for the production of the rota's to ensure a consistent and transparent approach will be maintained.</p> <p>Management agreed to review training logs regularly and ensure medication training is undertaken annually.</p> <p>Management agreed to implement regular DBS status checks across all sites.</p> <p>The medication policy will be updated to include review dates and a responsible officer and a documented process will be maintained for handling and reporting any errors in medication administration.</p> <p>Management agreed to liaise with Finance to raise awareness to ensure purchase cards and petty cash usage has robust arrangements for ensuring value for money and authorisation is obtained. They will also ensure that timely authorisation of transactions and the appropriate reporting of VAT.</p> <p>Management agreed to produce a document to detail the induction process for parents, children and employees.</p> <p>Management agreed to continue to ensure that the care management system currently under development is made functional and fit for purpose for the service.</p> <p>Management agreed to make local managers aware of corporate arrangements ensuring corporate contracts are used where appropriate.</p>	Adequate		Priority 1	0	Priority 2	13	Priority 3	3
Adequate										
Priority 1	0									
Priority 2	13									
Priority 3	3									

Blackpool Council: Risk Services

Directorate	Review Title	Assurance Statement							
Corporate	Non-Contracted ICT Software	<p><u>Scope</u></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> • Whether any non-contracted pieces of software exist which have not been identified as part of GDPR related activities. • Whether there are any websites which have been commissioned outside the Council’s own website which have not been captured and assessed to ensure that they are secure. • Whether any software or websites identified above may present a significant risk in relation to data protection or cyber security. <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" data-bbox="748 786 1469 824"> <tr> <td align="center">Inadequate</td> </tr> </table> <p>Our audit identified that progress in terms of software governance processes had been notable over recent months, with additional work planned to further enhance the approach. However there are uncontrolled risks relating to the security of externally hosted websites.</p> <p>Work relating to potential contract variations as part of GDPR related activity has also fallen by the wayside and remains incomplete. We therefore consider that the controls in place are currently inadequate and have made a number of recommendations in order to address the issues identified.</p> <p><u>Number of Recommendations Made</u></p> <table border="1" data-bbox="748 1305 1469 1413"> <tr> <td>Priority 1</td> <td align="center">2</td> </tr> <tr> <td>Priority 2</td> <td align="center">5</td> </tr> <tr> <td>Priority 3</td> <td align="center">2</td> </tr> </table> <p><u>Management Response</u></p> <p>The Information Governance Group will be re-established and steps will be taken to ensure that the remaining outstanding work regarding high risk contracts and potential contract variations is completed.</p> <p>Management agreed to amend the online software form and flow to prevent a user from continuing with a new software request if personal data is being processed and there is no contract in place with Procurement and Legal Services.</p> <p>Management agreed that DPIA and IT due diligence will be validated at an early stage in the process.</p> <p>Tools to be utilised to identify unknown software will be undertaken to determine if there are any concerns.</p> <p>The Information Governance Group will consider how checks of Due Diligence and DPIA for externally hosted websites should be introduced in order to provide assurance that potential vulnerabilities are addressed.</p>	Inadequate	Priority 1	2	Priority 2	5	Priority 3	2
Inadequate									
Priority 1	2								
Priority 2	5								
Priority 3	2								

Blackpool Council: Risk Services

Directorate	Review Title	Assurance Statement	
Corporate	Organisational Culture	<p><u>Scope</u></p> <p>The scope of our audit was to assess the Council’s organisational culture against the McKinsey model which is advocated by the Chartered Institute of Internal Auditors. The tool covers seven themes including:</p> <ul style="list-style-type: none"> • Shared Values • Style • Skills • Staff • Strategy • Structure • Systems <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" data-bbox="751 792 1465 831"> <tr> <td align="center">Adequate</td> </tr> </table> <p>The data considered as part of this audit evidenced that the Council has in place an adequate organisational culture. Whilst further improvements can always be made no significant gaps in terms of systems and processes were identified. The greatest area of risk is ensuring that arrangements are consistently applied as found in the recent audit of Compliance with Corporate Arrangements.</p> <p>Specific recommendations have not been made in this report as this base data should be used in conjunction with the output from the employee survey in order to develop a coordinated and robust methodology to further develop and embed the Council’s organisational culture.</p>	Adequate
Adequate			

Blackpool Council: Risk Services

Directorate	Review Title	Assurance Statement								
Resources	Client Finances	<p><u>Scope</u></p> <p>The scope of the audit was to review:</p> <ul style="list-style-type: none"> • The policies and procedures in place to assess whether these are being operated as intended; • Progress made to implement the recommendations which were agreed in the 2016 audit; and • The additional controls put in place following the discovery of fraudulent activity within the service in 2018. <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" data-bbox="748 680 1468 719"> <tr> <td align="center" colspan="2">Adequate</td> </tr> </table> <p>Overall we have assessed that there is an adequate system of controls for client finances. However, there is scope to further enhance controls around authorisation of purchase card transactions, finance requests and the reconciliation process. Our testing revealed minor lapses in compliance with the controls.</p> <p><u>Number of Recommendations Made</u></p> <table border="1" data-bbox="748 1021 1468 1133"> <tr> <td>Priority 1</td> <td align="center">0</td> </tr> <tr> <td>Priority 2</td> <td align="center">4</td> </tr> <tr> <td>Priority 3</td> <td align="center">2</td> </tr> </table> <p><u>Management Response</u></p> <p>Management agreed that clients link card details will not be disclosed on the cardholder agreement.</p> <p>Records will be maintained of all future visits to Blackpool Football Stadium to evidence audit visits.</p> <p>Management agreed to carry out more checks between clients' accounts and bank accounts.</p> <p>Typed signatures will no longer be accepted unless supported by an email from the relevant service manager.</p>	Adequate		Priority 1	0	Priority 2	4	Priority 3	2
Adequate										
Priority 1	0									
Priority 2	4									
Priority 3	2									

Blackpool Council: Risk Services

Directorate	Review Title	Assurance Statement								
Resources	Water Self Supply	<p><u>Scope</u></p> <p>The scope of our audit was to review the arrangements for and outcomes from water self- supply.</p> <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td colspan="2" style="text-align: center;">Inadequate</td> </tr> </table> <p>We consider the controls in place regarding water self - supply arrangements and outcomes to be inadequate, with a number of risks identified and changes necessary to improve controls. The key issues relate to a lack of clarity regarding historical financial liability for water supplies and savings achieved as a result of the new arrangements.</p> <p><u>Number of Recommendations Made</u></p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 70%;">Priority 1</td> <td style="text-align: center;">3</td> </tr> <tr> <td>Priority 2</td> <td style="text-align: center;">5</td> </tr> <tr> <td>Priority 3</td> <td style="text-align: center;">0</td> </tr> </table> <p><u>Management Response</u></p> <p>Management agreed to identify the actual application costs incurred for water self – supply.</p> <p>Management agreed to reconcile the full costs of operating the Council’s water self – supply arrangements in the first 12 months of operation versus the expected outcomes from the arrangements and the costs for the previous 12 months of operation. This will be reported to the Council’s Energy and Utilities Group.</p> <p>Management have sought legal advice and an appropriate approach and debt provision has been determined relating to water charges and potential historical liabilities.</p> <p>Management agreed to review and change the system towards suppliers billing directly to services.</p>	Inadequate		Priority 1	3	Priority 2	5	Priority 3	0
Inadequate										
Priority 1	3									
Priority 2	5									
Priority 3	0									

Blackpool Council: Risk Services

Directorate	Review Title	Assurance Statement							
Schools	Stanley Primary School	<p><u>Scope</u></p> <p>The audit testing which was carried out included:</p> <ul style="list-style-type: none"> • Governance • Risk Management • Financial Planning & Budgetary Control • Payroll / HR Management • Expenditure • Income • Unofficial Funds • Security Of Assets • Core Assurance Testing <p><u>Overall Opinion and Assurance Statement</u></p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">Adequate</td> </tr> </table> <p>We consider that the controls in place are adequate with some risk identified and assessed, and several changes necessary.</p> <p>Our testing revealed minor lapses in compliance with the controls.</p> <p><u>Number of Recommendations Made</u></p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">Priority 1</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: center;">Priority 2</td> <td style="text-align: center;">7</td> </tr> <tr> <td style="text-align: center;">Priority 3</td> <td style="text-align: center;">4</td> </tr> </table> <p><u>Management Response</u></p> <p>The school agreed that the governing body should agree a scope for the use of the unofficial fund and ensure the purpose of the account is solely for this use with regular oversight by governors.</p> <p>The school agreed that the school should refrain from using the unofficial fund where transactions are for the school budget.</p>	Adequate	Priority 1	0	Priority 2	7	Priority 3	4
Adequate									
Priority 1	0								
Priority 2	7								
Priority 3	4								

Progress with Priority 1 audit recommendations

The review of priority one recommendations is usually undertaken at the end of each quarter. Due to the Council being extremely busy responding to the Covid-19 incident this review has been delayed until the first quarter in 2020/21.

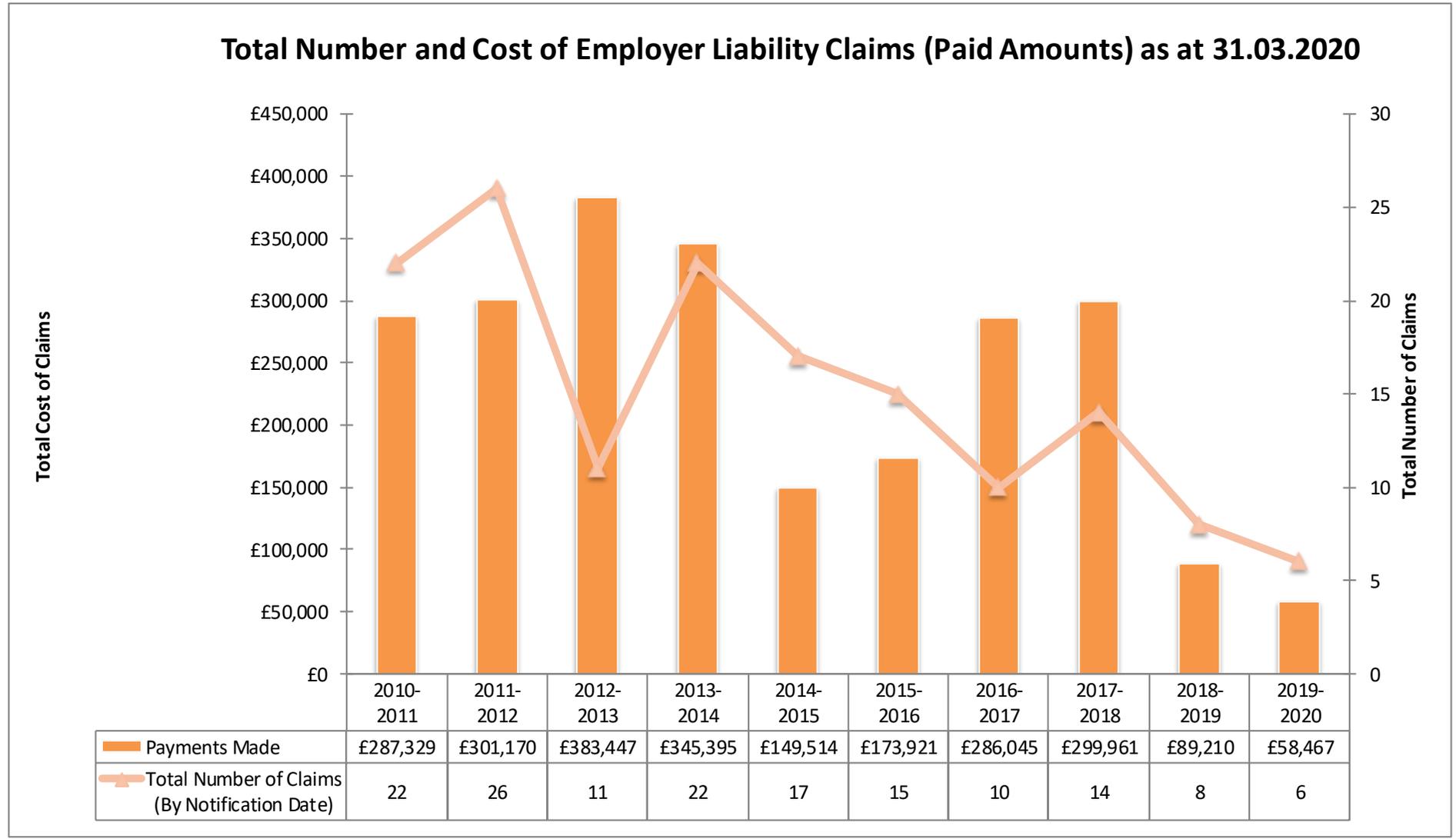
The Regulation of Investigatory Powers Act 2000

In line with best practice it has been agreed that the Council will report to the Audit Committee the number of RIPA authorisations undertaken each quarter, which enables the Council to undertake directed and covert surveillance. Between January and March 2020 the Council authorised no RIPA's.

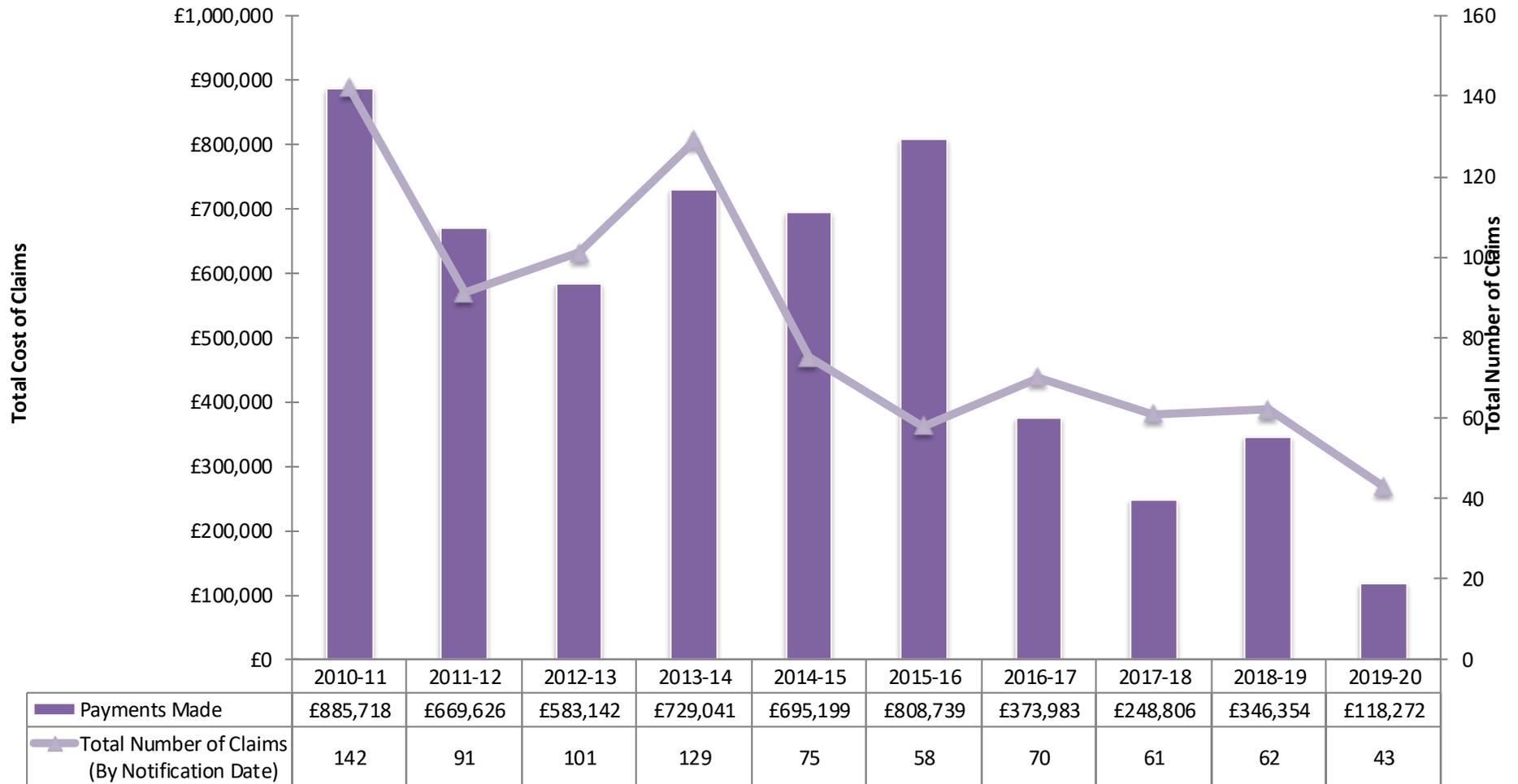
Insurance claims data

The graphs at Appendix B show the cost of liability insurance claims paid to date each financial year by the Council.

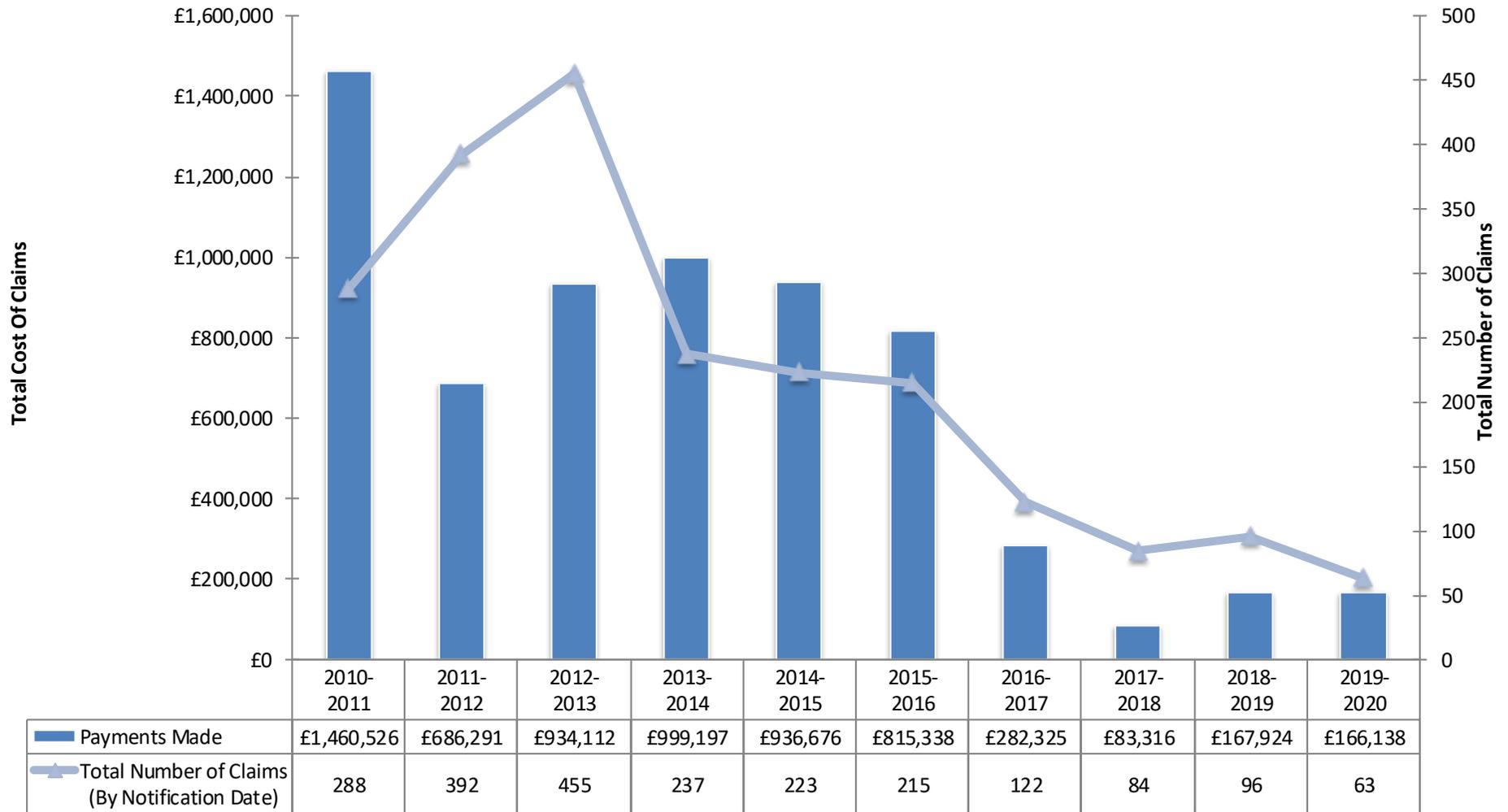
3. Appendix B – Insurance Claim Payments by Financial Year



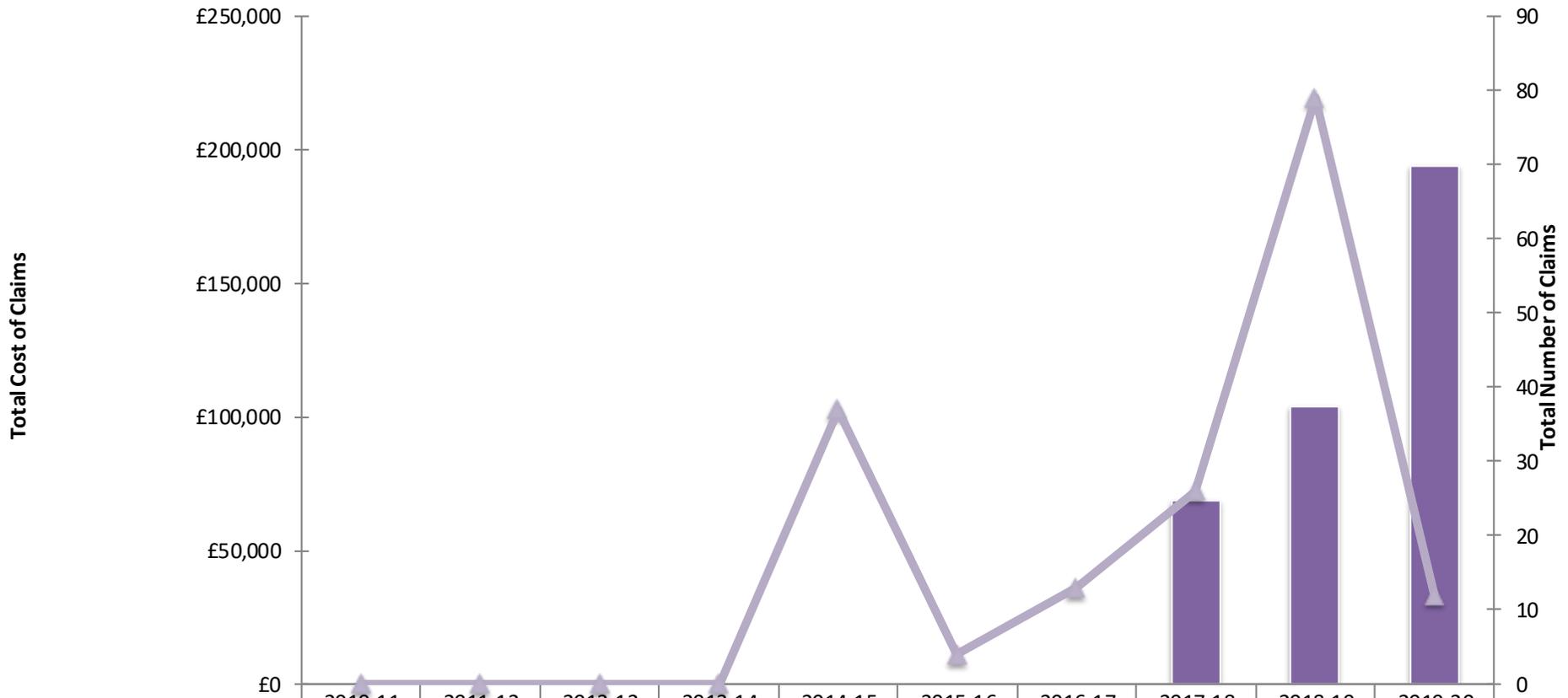
Total Number and Cost of Public Liability Claims (Paid) as at 31.03.2020



Total Number and Cost of Public Liability Highways Claims (Paid) as at 31.03.2020



Total Number and Cost of Sensitive Claims/Notifications (Paid) as at 31.03.2020



Payments Made	£0	£0	£0	£0	£0	£0	£0	£68,803	£103,722	£193,832
Total Number of Claims/Notifications (By Notification Date)	0	0	0	0	37	4	13	26	79	12

Report to:	AUDIT COMMITTEE
Relevant Officer:	Tracy Greenhalgh, Head of Audit and Risk
Date of Decision/ Meeting	25 June 2020

INTERNAL AUDIT QUALITY ASSURANCE AND IMPROVEMENT PROGRAMME 2020/2021

1.0 Purpose of the report:

1.1 A requirement of the Public Sector Internal Audit Standards is that a Quality Assurance and Improvement Programme is implemented for the internal audit team and approved by senior management and the Audit Committee.

2.0 Recommendation(s):

2.1 To consider and approve the Quality Assurance and Improvement Programme for the internal audit service for 2020/2021.

3.0 Reasons for recommendation(s):

3.1 The completion of a Quality Assurance and Improvement Programme is a requirement of the Public Sector Internal Audit Standards.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

None.

4.0 Council Priority:

4.1 The work of Risk Services contributes to the delivery of all of the Council's priorities.

5.0 Background Information

5.1 Internal Audit's Quality Assurance and Improvement Programme (QAIP) is designed to provide reasonable assurance to stakeholders of internal audit that the service:

- Performs its work in accordance with its Charter which conforms to the requirements of the Public Sector Internal Audit Standards (PSIAS);
- Operates in an effective and efficient manner; and

- Is perceived by stakeholders as adding value and improving operations.

Internal Audit's QAIP covers all aspects of the Internal Audit Service in accordance with the PSIAS Standard 1300 (Quality Assurance and Improvement Programme), including:

- Monitoring the internal audit activity to ensure it operates in an effective and efficient manner;
- Ensuring compliance with the PSIAS' Definition of Internal Auditing and Code of Ethics;
- Helping the Internal Audit service add value and improve organisational operations;
- Undertaking both periodic and on-going internal assessments;
- Commissioning an external assessment at least once every five years, the results of which are communicated to the Audit Committee and Corporate Leadership Team in accordance with the Standards.

The Head of Audit and Risk is ultimately responsible for the QAIP, which covers all types of internal audit activity, including advice and consulting.

Does the information submitted include any exempt information?

No

List of Appendices:

Appendix 7(a) – Quality Assurance and Improvement Programme 2020/2021.

6.0 Legal considerations:

6.1 All work undertaken by Risk Services is in line with relevant legislation and professional standards.

7.0 Human Resources considerations:

7.1 All members of the internal audit team are involved in the development of the improvement programme and delivering the identified outcomes. Provision is made available in the audit plan to ensure that team members have the capacity to be involved.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 All identified improvement actions will be delivered within the allocated budget for the service.

10.0 Risk management considerations:

10.1 An external assessment of the Council's internal audit service confirmed that the team conforms to the Public Sector Internal Audit Standards. Therefore it is not considered that

any of the improvement actions are high risk but are targeted at further strengthening the service delivered.

11.0 Ethical considerations:

11.1 All staff in the internal audit service adhere to the Code of Ethics as set out in the Public Sector Internal Audit Standards.

12.0 Internal/ External Consultation undertaken:

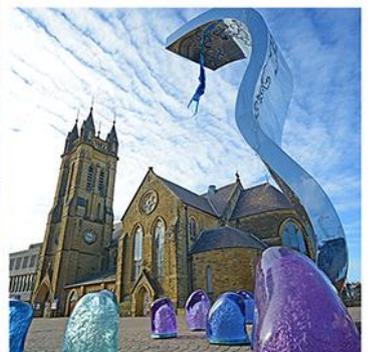
12.1 All members of the internal audit team are involved in the development of the improvement programme. The document has also been approved by the Corporate Leadership Team prior to being presented to Audit Committee.

13.0 Background papers:

13.1 None.

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Internal Audit Quality Assurance and Improvement Programme 2020/21



Quality Assurance and Improvement Programme 2020-21

Introduction

Internal Audit's Quality Assurance and Improvement Programme (QAIP) is designed to provide reasonable assurance to stakeholders of the internal audit service that it:

- Performs its work in accordance with its Charter which conforms to the requirements of the Public Sector Internal Audit Standards (PSIAS);
- Operates in an effective and efficient manner; and
- Is perceived by stakeholders as adding value and improving Internal Audit's operations.

Internal Audit's QAIP covers all aspects of the Internal Audit Service in accordance with the PSIAS Standard 1300 (Quality Assurance and Improvement Programme), including:

- Monitoring the internal audit activity to ensure it operates in an effective and efficient manner;
- Ensuring compliance with the PSIAS' Definition of Internal Auditing and Code of Ethics;
- Helping the Internal Audit service add value and improve organisational operations;
- Undertaking both periodic and on-going internal assessments;
- Commissioning an external assessment at least once every five years, the results of which are communicated to the Audit Committee and Corporate Leadership Team in accordance with the Standards.

The Head of Audit and Risk is ultimately responsible for the QAIP, which covers all types of internal audit activity, including advice and consulting.

Internal Assessments

In accordance with PSIAS Standard 1300, internal assessments are undertaken through both on-going and periodic reviews.

On-Going Reviews

Continual assessments are conducted through:

- Management supervision of all audit activities and structured, documented review of all working papers.
- Audit quality procedures used for each engagement to ensure consistency, quality and compliance with appropriate planning, fieldwork and reporting standards.
- Review of all draft and final reports by Senior Auditors and the Head of Audit and Risk before they are issued.
- Feedback from audit clients obtained through customer satisfaction surveys which are issued at the end of every audit.
- Monthly one to ones between the Head of Audit and Risk and the Senior Auditors, and between the Senior Auditors and the Audit team.
- Monthly Risk Services and Audit team meetings.

Quality Assurance and Improvement Programme 2020-21

Internal Audit Performance Management

In order to monitor the performance of the internal audit team year on year, an agreed suite of performance indicators are in place. Progress against the performance indicators is reported to the Corporate Leadership Team and Audit Committee each quarter. The suite of indicators is:

- Percentage of annual audit plan completed;
- Percentage draft reports issued within deadline;
- Percentage audit work within resource budget;
- Percentage of positive satisfaction surveys;
- Percentage compliance with quality standards for audit reviews.

Details of performance against the targets for a three year period are illustrated below:

	2017/18		2018/19		2019/20	
	Target	Actual	Target	Actual	Target	Actual
Audit plan completed	90%	99%	90%	94%	90%	90%
Draft reports delivered in deadline	96%	100%	96%	93%	96%	98%
Audit work completed in budget	92%	95%	92%	91%	92%	93%
Positive satisfaction surveys	85%	92%	85%	89%	85%	92%
Compliance with quality standards	85%	90%	85%	90%	85%	93%

In addition to receiving a score in relation to customer satisfaction surveys sometimes comments are also included. These can be both supportive of the work of the auditors or identify lessons for improvement and these are summarised below:

Positive Feedback	Areas to Improve
<ul style="list-style-type: none"> ▪ As always, a professional approach to the audit. 	<ul style="list-style-type: none"> ▪ There was some areas of scope which extended beyond my service.
<ul style="list-style-type: none"> ▪ A new audit but scoped well from the beginning involving relevant stakeholders resulting in a good audit in an unusual area. 	<ul style="list-style-type: none"> ▪ The draft report required significant change relating to the Senior Responsible Officer for the recommendations.
<ul style="list-style-type: none"> ▪ The audit supported the regulatory compliance of the service. 	<ul style="list-style-type: none"> ▪ I don't think I was reasonably involved in the audit review.
<ul style="list-style-type: none"> ▪ The audit outcomes support ongoing development of the service. 	

Quality Assurance and Improvement Programme 2020-21

Positive Feedback	Areas to Improve
<ul style="list-style-type: none"> Good focus in terms of audit testing. 	
<ul style="list-style-type: none"> It is a complicated and developing area but the auditor performed well. 	
<ul style="list-style-type: none"> It will help move the processes on as they need to within a multi-disciplinary team approach. 	
<ul style="list-style-type: none"> It was good to see that improvement had been recognised - sincere thanks to the audit team. 	
<ul style="list-style-type: none"> The review was very well handled and very useful in helping to drive the challenging programme forward. 	
<ul style="list-style-type: none"> Operational managers were more involved than I was but I was satisfied with this level of communication. 	
<ul style="list-style-type: none"> The flexibility of the auditor in terms of wanting to get to know the service contributed to the quality of the audit outcome and recommendations. 	
<ul style="list-style-type: none"> The audit was helpful in encouraging great collaboration between services. 	

Periodic Reviews

Periodic assessments are designed to assess conformance with Internal Audit's Charter, the PSIAS Definition of Internal Auditing, the Code of Ethics and the efficiency and effectiveness of the Internal Audit function in meeting the needs of its various stakeholders. Periodic assessments are conducted through:

- An annual risk assessment of the Audit Universe for the purpose of audit planning.
- Annual review of compliance against the requirements of the QAIP, undertaken by the Head of Audit and Risk, the results of which are reported to the Corporate Leadership Team and Audit Committee.
- Annual internal audit service improvement day.
- Compliance with the Individual Performance Appraisal process which sees a full annual and a six monthly assessment of auditor team performance.
- Periodic benchmarking with other local authorities to identify differences in coverage and potential areas for change.
- Networking with other local authorities to identify best practice and potential changes to implement.

Quality Assurance and Improvement Programme 2020-21

The Head of Audit and Risk will implement appropriate follow-up to any identified actions to ensure continual improvement of the service.

Any significant areas of non-compliance with the PSIAS that are identified through internal assessments will be reported in the Annual Audit Report and used to inform the Annual Governance Statement.

External Assessments

External assessment will appraise and express an opinion about internal audit's conformance with the PSIAS Definition of Internal Auditing and Code of Ethics. The assessment report will include recommendations for improvement as appropriate.

Frequency of External Assessment

An external assessment will be conducted at least every five years, in accordance with the PSIAS. Appointment of the External Assessor and scope of the external assessment will be approved by the Audit Committee. The last external assessment took place in June 2016.

Scope of External Assessment

The scope of the external assessment is broad and includes the following elements of Internal Audit activity:

- Conformance with the Standards, Definition of Internal Auditing, the Code of Ethics and Internal Audit Charter; plans, policies, procedures, practices and any applicable legislative and regulatory requirements.
- Integration of the Internal Audit activity into the Council's governance framework, including the audit relationship between and among the key groups involved in the process.
- Tools and techniques used by Internal Audit.
- The mix of knowledge, experiences and disciplines within the staff, including staff focus on process improvement delivered through this Quality Assurance and Improvement Programme.
- A determination whether Internal Audit adds value and improves the Council's operations.

Results of external assessments are provided to the Audit Committee. The external assessment report will be accompanied by an action plan in response to the comments and recommendations identified. Any significant areas of non-compliance will be reported in the Annual Audit Report and the Council's Annual Governance Statement.

Review of the QAIP

The QAIP will be appropriately updated following any changes to the PSIAS or Internal Audit's Operating Environment. It will be reviewed, as a minimum, on an annual basis.

Quality Assurance and Improvement Programme 2020-21

Action Taken Since QAIP 2019/20

A number of actions, which were identified in the QAIP 2019/20, have been implemented throughout 2019/20 and are shown in **Appendix 1**.

Action Plan 2020/21

Actions to be addressed throughout 2020/21 and future years QAIP's are shown in **Appendix 2**.

Appendix 1 – Actions Completed in 2019/20

Source	Issue	Completed Action
Internal Audit Strategic Plan 2018/21	<p>Develop resource planning to ensure that the team is appropriately structured to deliver the increasing risk focused demands on the service.</p> <p>Keep up to date with the changing landscape at the Council and the increasing number of wholly owned companies and adapt the way in which the internal audit service is delivered accordingly.</p>	<p>A review of the organisation structure has taken place to increase capacity across the team for delivering a wide range of work.</p> <p>All members of the team are now involved in providing services to our wholly owned companies therefore increasing commercial knowledge and the work of different sectors.</p>
Internal Audit Strategic Plan 2018/21	<p>Ensure that adequate IT audit provision is available within the team.</p>	<p>The service have signed up to the Lancashire wide IT procurement framework for the provision of specialist IT audit support where required.</p>
Internal Audit Strategic Plan 2018/21	<p>Strengthen the integration with the wider Risk Services to enhance knowledge and experience and deliver a cohesive risk management and assurance service to the Council.</p>	<p>Where appropriate joint advice / consultancy / audits are provided across the Audit and Risk team which has increased joint working.</p>

Appendix 2 – Actions to Complete in 2020/21

Source	Theme	Action	Status	Target Date
Internal Audit Strategic Plan 2018/21	Knowledge and Skills	<ul style="list-style-type: none"> • Ensure that all staff in the team are appropriately qualified and have a broad range of experience. • Look to skill a member of the audit team with IT audit skills to further enhance the team's ability. • Explore the potential of training a team member in formal contract audit. • Look to produce development plans for each Auditor / Senior Auditor to ensure that they get the experience they need / want to further develop their skills. • Set up a library of Audit Programmes so that auditors have a reference point for future audits. • To develop standard test schedules for our compliance audit work, related to the establishment that we visit. 	Partially Implemented	March 2023
Internal Audit Strategic Plan 2018/21	Technology	<ul style="list-style-type: none"> • Explore the potential for using SharePoint for both the internal audit team and for the issue of audit reports. • Embrace technology to ensure that ability to undertake internal audit work remotely. • Explore options available for recording audit interviews and turning these into text files to reduce the resource needed for typing up notes (or other solutions which bring efficiencies). 	Partially Implemented	September 2020

Source	Theme	Action	Status	Target Date
Service Improvement Day	Communications	<ul style="list-style-type: none"> • Introduce monthly internal audit team meetings to discuss best practice, key findings and developments in the profession. • Produce a brief booklet outlining what our audit service, types of assurance we can provide and value we can add, aimed at our wholly owned companies Board members and their Audit Committees. 	Yet to start	October 2020
Service Improvement Day	Quality Assurance	<ul style="list-style-type: none"> • Ensure that meetings are arranged at the mid-point of all audits between the Senior Auditor and Auditor. Develop a template which should be used to record these meetings covering key points (which should be kept on the audit file as evidence of team leader review). • A review of file structures for audit reviews to be to ensure that all audit documents for each review are consistently filed. • Review the need for the Head of Audit and Risk or Senior Auditors to sign and review every document. More efficient if a team leader review document is in place which can evidence review throughout the life of the audit. • Full review of all core documents to make sure they are all relevant and correctly formatted including appropriate client facing templates in place for all of our wholly owned companies. • Ensure that the internal audit manual is fully up to date to reflect current working practices. 	Partially Implemented	October 2020
Service Improvement Day	Work Allocation	<ul style="list-style-type: none"> • Review alternatives to current Access Time Recording system. The current system is resource intensive compared to limited value it adds (managing chargeable time). 	Yet to start	March 2021

Source	Theme	Action	Status	Target Date
		<ul style="list-style-type: none"> • Look to scope all audits at the start of each quarter and build this into the audit process. • Quarterly meetings to be scheduled between Head of Audit and Risk and Senior Auditors to consider work allocation and resourcing. 		

Report to:	AUDIT COMMITTEE
Relevant Officer:	Tracy Greenhalgh, Head of Audit and Risk
Date of Meeting	25 June 2020

AUDIT COMMITTEE SELF-EVALUATION

1.0 Purpose of the report:

- 1.1 To consider the feedback from the self-evaluation exercise undertaken by the Audit Committee and senior officers who engage with the Committee on a regular basis and to approve the training plan.

2.0 Recommendation(s):

- 2.1 To consider the outcome of the self-evaluation exercise and to approve the training programme as well as to consider the other actions as identified in the report.

3.0 Reasons for recommendation(s):

- 3.1 To develop the effectiveness of the Audit Committee.

- 3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

- 3.2b Is the recommendation in accordance with the Council's approved budget? Yes

- 3.3 Other alternative options to be considered.

None.

4.0 Council Priority:

- 4.1 The effectiveness of the Audit Committee is relevant to all Council priorities.

5.0 Background Information

5.1 Elected Member Feedback

Members of the Audit Committee were invited to complete a self-evaluation checklist to help measure the effectiveness of the Committee. Five Members responded and completed a self-evaluation checklist which was based on the CIPFA Guidance for Audit Committees.

The self-assessment checklist asked Members to consider a number of questions in relation to the following topics:

- Audit Committee Purpose and Governance
- Functions of the Committee
- Membership and Support
- Effectiveness of the Committee

The results of the completed self-evaluation, along with the results from when the exercise was completed two years prior can be seen in the following table. An indication of the direction of travel has also been provided:

Ref	Good Practice Questions	May 2018			June 2020			DoT
		Yes	Partly	No	Yes	Partly	No	
<i>Audit Committee Purpose and Governance</i>								
1	Does the authority have a dedicated Audit Committee?	100%	-	-	100%	-	-	-
2	Does the Audit Committee report directly to full Council?	100%	-	-	100%	-	-	-
3	Do the terms of reference clearly set out the purpose of the Committee in accordance with CIPFA's Position Statement?	100%	-	-	80%	20%	-	✗
4	Is the role and purpose of the Audit Committee understood and accepted across the authority?	60%	20%	20%	80%	20%	-	✓
5	Does the Audit Committee provide support to the authority in meeting the requirements of good governance?	100%	-	-	80%	20%	-	✗
6	Are the arrangements to hold the Committee to account for its performance operating satisfactorily?	60%	20%	20%	100%	-	-	✓
<i>Functions of the Committee</i>								
7	Does the Committee's term of reference explicitly address all the core areas identified in CIPFA's position statement?							
	• Good governance	100%	-	-	100%	-	-	-
	• Assurance framework	100%	-	-	100%	-	-	-
	• Internal audit	100%	-	-	100%	-	-	-
	• External audit	100%	-	-	80%	20%	-	✗
	• Financial reporting	80%	20%	-	80%	20%	-	-
	• Risk management	100%	-	-	100%	-	-	-

	<ul style="list-style-type: none"> Value for money or best value 	100%	-	-	60%	40%	-	✗
	<ul style="list-style-type: none"> Counter-fraud and corruption 	100%	-	-	100%	-	-	-
8	Is an annual evaluation undertaken to assess whether the Committee is fulfilling its terms of reference and that adequate consideration has been given to all core areas?	60%	20%	20%	80%	-	20%	✓
9	Has the Audit Committee considered the wider areas identified in CIPFA's Position Statement and whether it would be appropriate for the Committee to undertake them?	40%	20%	40%	40%	20%	40%	-
10	Where coverage of core areas has been found to be limited, are plans in place to address this?	40%	20%	40%	60%	-	40%	✓
11	Has the Committee maintained its non-advisory role by not taking on any decision-making powers that are not in line with its core purpose?	100%	-	-	80%	-	20%	✗
Membership and Support								
12	Has an effective Audit Committee structure and composition to the committee been selected? This should include: <ul style="list-style-type: none"> Separation from the Executive An appropriate mix of knowledge and skills among the membership A size of Committee that is not unwieldy Where independent members are used, that they have been appointed using an appropriate process 	100%	-	-	80%	-	20%	✗
13	Does the Chair of the Committee have appropriate knowledge and skills?	100%	-	-	100%	-	-	-
14	Are arrangements in place to support the Committee with briefings and training?	100%	-	-	100%	-	-	-

15	Has the membership of the Committee been assessed against the core knowledge and skills framework and found to be satisfactory?	60%	20%	20%	80%	20%	0%	✓
16	Does the Committee have good working relations with key people and organisations, including external audit, internal audit and the Chief Financial Officer?	100%	-	-	100%	-	-	-
17	Is adequate secretariat and administrative support to the Committee provided?	100%	-	-	100%	-	-	-
<i>Effectiveness of the Committee</i>								
18	Has the Committee obtained feedback on its performance from those interacting with the Committee or relying on its work?	40%	20%	40%	60%	20%	20%	✓
19	Has the Committee evaluated whether and how it is adding value to the organisation?	40%	20%	40%	20%	60%	20%	✗
20	Does the Committee have an action plan to improve any areas of weakness?	40%	40%	20%	60%	-	40%	✓

Comments

Training and Development Requirements

- Happy with the level of training.
- Concise training.
- Explanation of basics in a readable format.
- Work on value for money.
- Any areas which the Committee can help the Council emerge from the pandemic crisis.
- Continued provision of regular training.
- More training around external audit reports.

Key Strengths of the Audit Committee

- Level of challenge.
- Working as one team.
- Good governance and accountability.
- Willingness to learn and positive energy.
- Cross party working and representation.
- Diverse group of members.
- Committed team.
- Chairman is very knowledgeable and effective in his role. Very supportive of other

members and encourages interaction with meetings and training.

- Audit team are very effective at answering questions and taking feedback on board.

Improvements which could be made to the Audit Committee

- Training sessions on a day separate from the Committee meeting.
- The recruitment of an enthusiastic independent member.
- The continued development of newer members of the Committee combined with a more targeted use of more experienced ones.
- Developing the confidence of newer members.
- Sometimes members ask questions not relevant or related to audit.

Officer Feedback

A number of Officers who engage with the Audit Committee were also asked to undertake an evaluation of the Committee based on their experiences. A number of questions were asked, based on the CIPFA Guidance on Audit Committees and Officers were also asked to provide any comments or suggestions as to potential improvements going forward. Six responses were received in total.

The results of the completed self-evaluation, along with the results from when the exercise was completed two years prior can be seen in the following table. An indication of the direction of travel has also been provided:

Ref	Good Practice Questions	May 2018			June 2020			DoT
		Yes	Partly	No	Yes	Partly	No	
1	Is the role and purpose of the Audit Committee understood and accepted across the authority?	67%	33%	-	50%	34%	16%	✗
2	Does the Audit Committee provide support to the authority in meeting the requirements of good governance?	83%	17%	-	100%	-	-	✓
3	Are the arrangements to hold the Committee to account for its performance operating satisfactorily?	66%	17%	17%	100%	-	-	✓
4	Has the Committee maintained its non-advisory role by not taking on any decision-making powers that are not in line with its core	66%	17%	17%	84%	16%	-	✓

	purpose?							
5	Does the Chair of the Committee have the appropriate knowledge and skills?	100%	-	-	100%	-	-	-
6	Does the Committee have good working relations with key people and organisations, including external audit, internal audit and the Chief Financial Officer?	100%	-	-	100%	-	-	-
7	Do you consider that the Audit Committee performs well and achieves its core function?	67%	33%	-	84%	16%	-	✓
8	Do you believe that the Audit Committee adds value to the organisation?	83%	17%	-	66%	34%	-	✗
9	Do you find members of the committee approachable?	100%	-	-	100%	-	-	-
10	Do you feel that the committee offers the appropriate level of challenge?	50%	50%	-	100%	-	-	✓

Comments

Role and Purpose of Committee

- Not all leaders under CLT understand the role or importance of Audit Committee.
- It's perceived that some officers feel that this is a star chamber rather than an opportunity to clarify issues.

Committee Performance

- The Chair is keen to ensure that the Committee is held to account for its performance.
- The Chair reports to Full Council where questions are asked about the work of the Committee.
- A quality Chair is in place.
- The Chair is prepared for meetings and expects members and officers to have done

likewise.

- The Chair makes every effort to ensure that the Committee has good working relationships with key stakeholders.
- The Committee has a very professional relationship with all key stakeholders.
- Whilst the Chair and some Committee members perform well and achieve the Committee's core function some members don't contribute to this as well as others.
- The Committee adds value by appraising the strategic risks and holding officers to account.
- The essential functions are carried out by the Committee however specific added value is largely difficult to ascertain.
- A number of items on the agenda do make a difference but some appear to be routine rather than essential.

Challenge

- The Committee requires Heads of Service to attend to account for their actions, decisions and performance.
- There is a human tendency for all people to stray into their own opinion and this does sometimes happen.
- An appropriate level of challenge is provided but this tends to be provided by a small core selection of the Committee.
- There is a healthy, inquisitive culture of respectful challenge across the Committee.

Training Programme 2020/2021

To continue to develop the skills and knowledge of Committee Members the following training programme is proposed for 2020/2021:

Date	Topic	Presenter
June 2020	Audit Committee Terms of Reference	Director of Governance and Partnerships
September 2020	Understanding the role of external audit and their reports	Deloitte
November 2020	Statement of Accounts	Chief Accountant
March 2021	Understanding value for money	Director of Resources
April 2021	Managing strategic risks	Head of Audit and Risk

Audit Committee Terms of Reference

The function of the Audit Committee is to provide an independent and high-level resource to support good governance and strong public financial management. The purpose of an Audit Committee is to provide to those charged with governance independent assurance on the adequacy of the risk management framework, the internal control environment and the integrity of the financial reporting and governance processes. By overseeing both internal and external audit it makes an important contribution to ensuring that effective assurance arrangements are in place. The purpose of this training session is to ensure that elected members understand the

roles and responsibilities of the Audit Committee and how it functions as a key component of an authority's governance framework.

Understanding the role of external audit and their reports

The Audit Committee's role in relation to the external audit process has three principal aspects which include providing assurance that the external audit team maintains independence following its appointment, receiving and considering the work of external audit and supporting the quality and effectiveness of the external audit process. The purpose of this training session is to ensure that elected members understand the role of external audit and can correctly interpret the reports provided to the Audit Committee. The session will also cover the impact that Covid-19 could have on financial reporting and how this will be considered by external audit.

Statement of Accounts

Local authority financial statements should follow the professional practices set down in the Code of Practice on Local Authority Accounting in the United Kingdom (CIPFA/LASAAC). The Audit Committee undertakes a review of the statements and should satisfy themselves that appropriate steps have been taken to meet statutory and recommended professional practices. The purpose of this training is to equip elected members with the skills to understand this complex document and highlight the areas of particular relevance where the Audit Committee could focus their attention when scrutinising the document.

Understanding value for money

Making best use of resources is a key objective for all local authorities and the Council must have arrangements in place to achieve value for money (VfM). The role of the Audit Committee should focus on whether the authority's overall approach to VfM is in line with governance objectives and should receive assurances on this to underpin the Annual Governance Statement. It should also consider the external auditor's statutory value for money conclusion. The purpose of this session is to ensure that elected members understand what VfM means and how this is demonstrated at the Council so the Audit Committee can ask informed questions to gain assurance that robust arrangements are in place.

Managing Strategic Risks

The role of the Audit Committee in relation to risk management covers three major areas including assurance over the governance of risk, keeping up to date with the risk profile and the effectiveness of risk management actions and monitoring the effectiveness of risk management arrangements and supporting the development and embedding of good practice in risk management. The purpose of this session is to ensure that elected members understand the Council's risk management process and can effectively interpret the strategic risk register. The session will also touch on the importance of the Audit Committee having a flexible agenda in order to adapt to new or heightened risks ensuring that the Audit Committee is responsive and focused on priority issues, such as the Covid-19 pandemic.

Other Actions

In terms of further development of the Audit Committee, members might like to consider:

- **Audit Committee Development Workshop** – this could be facilitated for elected members to review the results of the benchmarking exercise in more detail and assess what further actions can be undertaken to ensure continuous improvements.
- **Terms of Reference Review** – a session could be facilitated to review the Audit Committee’s terms of reference against the CIPFA code and make recommendations on how this could be enhanced.

Does the information submitted include any exempt information?

No

List of Appendices:

None.

6.0 Legal considerations:

6.1 The purpose of the self-evaluation is to help ensure that members of the Committee effectively fulfil their responsibilities as members of the Audit Committee.

7.0 Human Resources considerations:

7.1 Members of the Committee may wish to complete the CIPFA Guidance on Audit Committees evaluation titled Audit Committee Members – Knowledge and Skills Framework. This may identify additional training and development needs which could potentially be provided internally, or where budget allows, at external events.

8.0 Equalities considerations:

8.1 All members of the Committee have the same access to training available.

9.0 Financial considerations:

9.1 It is anticipated that the training programme for Committee members will be delivered within existing Council budgets.

10.0 Risk management considerations:

10.1 The Audit Committee has a key role in the governance of the Council and therefore it is important that it engages in the development and delivery of an improvement plan to ensure that it can effectively manage risk.

11.0 Ethical considerations:

11.1 None.

12.0 Internal/ External Consultation undertaken:

12.1 Consultation has taken place with Chief Officers and Committee members.

13.0 Background papers:

13.1 CIPFA Audit Committee Guidance.