

Risk Services Quarterly Report  
1<sup>st</sup> October to 31<sup>st</sup> December 2014

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## Risk Services Quarter Three Report – 2014/2015

### 1. Third Quarter Summary

#### *Service Developments*

##### 1.1 *Internal Audit*

The service is continuing to support a range of Council projects including the transition to the new banking contract, Framework-I Phase Two implementation and Troubled Families audit and verification requirements.

A full review of the Financial Control Assurance compliance testing has been undertaken which covers the key financial systems across the Council. The purpose of this review was to ensure that the audit approach continued to focus on key controls and to make better use of IDEA file interrogation software to further automate testing and enable a larger amount of data to be analysed.

Two changes to the Internal Audit Plan have been agreed with the Section 151 Officer and the planned review of Bickerstaffe House Working Arrangements has been replaced with a review of BTS Management Accounts which was requested at the Shareholder Panel. The review of Visit Blackpool has now been replaced by a corporate review of Income and Debt Management which is considered a higher risk.

##### 1.2 *Investigations*

Steps continue to be taken to prepare for the transfer of the Benefit Fraud Team to the Department for Work and Pensions (DWP). An initial meeting has been held with the DWP who have provided an overview of the transition process and a more detailed project plan and timeline is expected from the DWP in January 2015. The staff have now received the measures document which compares their current terms and conditions to the DWP's conditions and a consultation process is now underway in conjunction with HR and the Trade Unions.

There are a number of corporate fraud investigations underway and the team are working closely with the Police on cases where it is appropriate to do so. Due to the number of investigations proactive anti-fraud work has been limited in the quarter.

All data has been submitted to the Audit Commission for the 2015 National Fraud Initiative exercise. We are expecting to receive the data matches in January 2015 and once received an assessment will be made on the level of resource required to undertake a review of the matches for each of the systems included.

##### 1.3 *Risk Management and Insurance*

Work has been ongoing to collate the necessary data for the insurance renewals for 2015/2016 and this was submitted to the Council's insurers in December. We are waiting to find out what the premiums will be however we are not anticipating significant changes in terms of costs compared to 2014/2015.

It has been determined that it would be beneficial to commission an independent review of the Council's insurance reserves to ensure that adequate provision is available to meet self-insurance requirements. A quotation exercise has been undertaken to ensure that value for money is achieved prior to awarding the work.

Work has been undertaken to complete the RMEQ Toolkit which is a risk management assessment toolkit provided by the Council's claim handlers. The toolkit identifies a range of high risk areas and

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requires a self-assessment of the Council current level of control and the provision of supporting evidence. An external verification of the self-assessment has been scheduled for January 2015.

1.4 *Emergency Planning and Business Continuity Planning*

The Emergency Planning Officer participated in a planning exercise facilitated by Public Health England in relation to the Ebola outbreak. The purpose of the exercise was to assess preparedness should an incident occur in the local area. A number of lessons were learned from this exercise and action will be taken to address the issues.

The Business Continuity Officer is planning an exercise to test the Corporate Business Continuity Plan and this will involve participation by the Corporate Leadership Team and Senior Leadership Team. The event is scheduled to take place on the 5th February 2015.

The team have completed the National Capability Survey which needs to be completed for the Cabinet Office ever two years to assess how Blackpool Council could respond to a major incident.

The Council continues to be vulnerable in terms of the number of trained Emergency Response Group volunteers. This is an issue across Lancashire and steps are being taken to liaise with Lancashire County Council and Blackburn and Darwen Council to address the shortfall and training needs.

**2. Performance**

*Internal Audit performance indicators*

| PI Ref.     | Performance Indicator<br>(Description of measure)               | 2014/15<br>Target | 2014/15<br>Actual |
|-------------|-----------------------------------------------------------------|-------------------|-------------------|
| Local IAPI1 | Percentage audit plan completed (annual target).                | 90%               | 62%               |
| Local IAPI2 | Percentage draft reports issued within deadline.                | 96%               | 96%               |
| Local IAPI3 | Percentage audit work within resource budget.                   | 92%               | 92%               |
| Local IAPI4 | Percentage of positive satisfaction surveys.                    | 85%               | 81%               |
| Local IAPI5 | Percentage compliance with quality standards for audit reviews. | 85%               | 84%               |

*Investigations performance indicators*

| PI Ref.    | Performance Indicator<br>(Description of measure)                                                                                                           | 2014/15<br>Target | 2014/15<br>Actual |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------|
| Local IPI1 | Number of fraud investigations, per 1,000 caseload.<br><i>(Based on the number of investigation cases divided by the overall number of benefit claims).</i> | 35                | 22.96             |

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| PI Ref.    | Performance Indicator<br>(Description of measure)                                                                                                                                     | 2014/15<br>Target | 2014/15<br>Actual |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------|
| Local IPI2 | Number of prosecutions and sanctions, per 1,000 caseload (annual target).<br><i>(Based on the total number of sanctions obtained divided by the overall number of benefit claims)</i> | 11                | 8.03              |
| Local IPI3 | Percentage cases closed resulting in changes to benefit.<br><i>(Based in the overall number of cases closed by the number of investigations undertaken).</i>                          | 50%               | 59%               |
| Local IPI4 | Percentage cases closed resulting in changes to benefit with sanctions.<br><i>(Based on the number of sanctions obtained divided by the number of positive cases investigated).</i>   | 54%               | 59%               |

**Investigations Team Statistics**

| Month         | Local Authority Overpayment | DWP Overpayment    | Sanctions |                 |                        |            |
|---------------|-----------------------------|--------------------|-----------|-----------------|------------------------|------------|
|               |                             |                    | Cautions  | Admin Penalties | Completed Prosecutions | +/- Target |
| October       | £82,711                     | £29,161            | 20        | 4               | 5                      | 7          |
| November      | £78,626                     | £22,971            | 18        | 5               | 4                      | 5          |
| December      | £56,987                     | £72,310            | 12        | 1               | 5                      | -3         |
| <b>Totals</b> | <b>£218,324.00</b>          | <b>£124,442.00</b> | <b>50</b> | <b>10</b>       | <b>14</b>              | <b>9</b>   |

At the last Finance and Audit Committee a year on year analysis of benefit fraud overpayments and collection rates was requested and this has been included in **Appendix D** of this report.

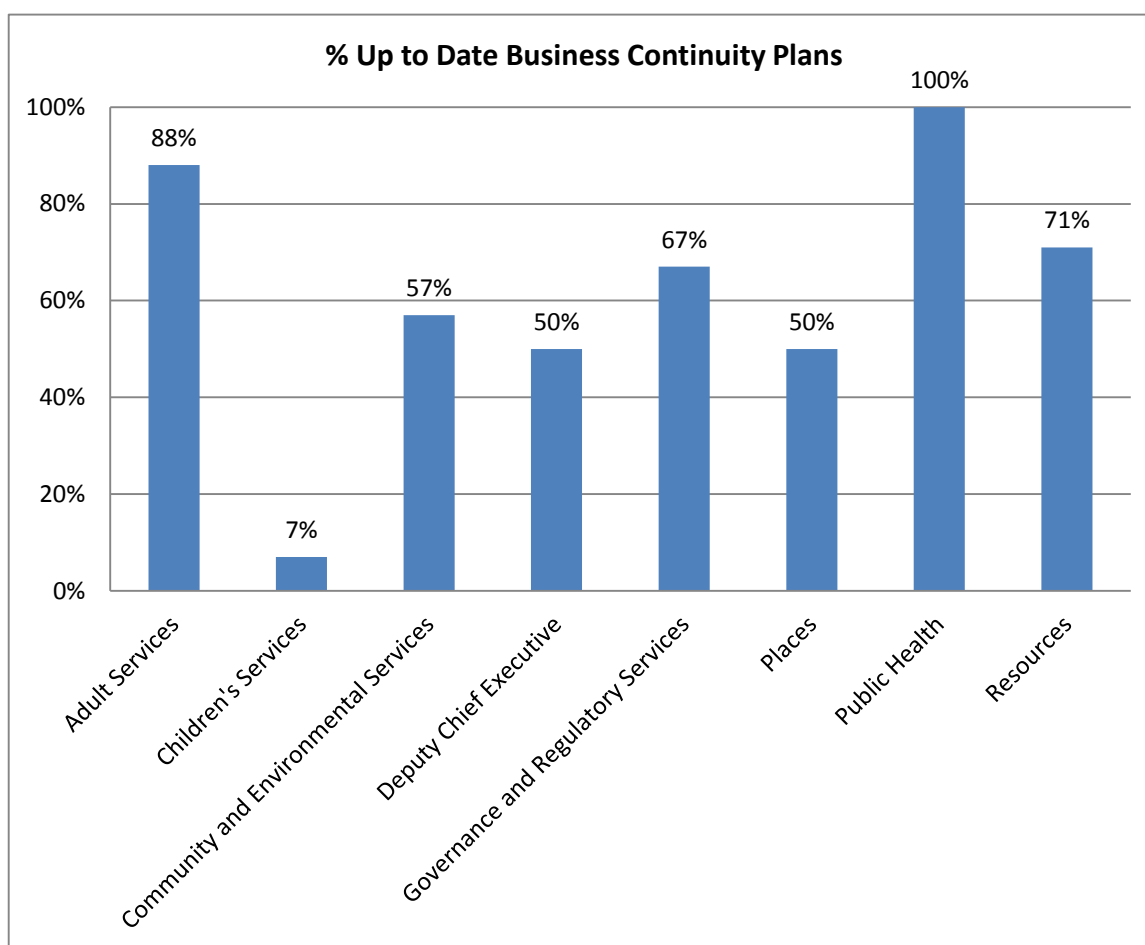
**Civil Contingencies performance indicators**

| PI Ref.<br>(BVPI, Local, PSA) | Performance Indicator<br>(Description of measure)                                          | 2014/15<br>Target | 2014/15<br>Actual |
|-------------------------------|--------------------------------------------------------------------------------------------|-------------------|-------------------|
| Local CC1                     | Percentage of Council services with business continuity plans.                             | 100%              | 84%               |
| Local CC2                     | Percentage of Council service business continuity plans updated during the financial year. | 90%               | 43%               |

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| PI Ref.<br>(BVPI, Local, PSA) | Performance Indicator<br>(Description of measure)                       | 2014/15 Target | 2014/15 Actual |
|-------------------------------|-------------------------------------------------------------------------|----------------|----------------|
| Local CC3                     | Number of civil contingency training and exercise sessions held.        | 6              | 3              |
| Local CC4                     | Number of trained Emergency Response Group Volunteers.                  | 60             | 45             |
| Local CC5                     | Number of updates to the Major Emergency Plan.                          | 2              | 0              |
| Local CC6                     | Percentage integration into the Lancashire Resilience Forum workstreams | 70%            | 70%            |

\*In support of the 43% of business continuity plans up to date by the end of the quarter the following graph shows a breakdown by directorate and included with this is narrative explaining the current position:



- Adult Services remain in a strong overall position with only a couple of plans outstanding.
- Children Services are in a very weak position given the critical nature of some of their functions / activities. Whilst most of the services still have plans in place, they are significantly out of date now.

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There have been numerous restructures over recent years and those plans cannot be relied upon. There is significant work to be undertaken within Children's Services to bring them up to date.

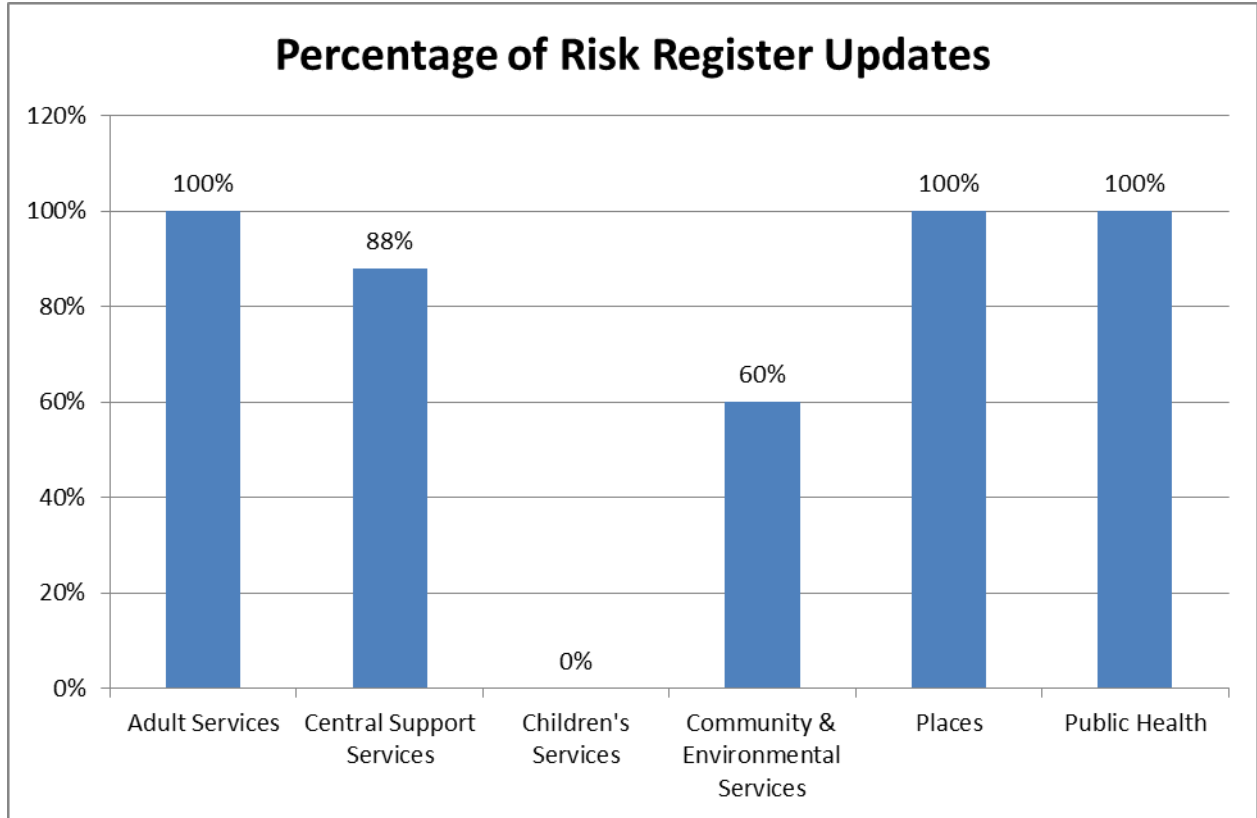
- Community and Environment are about to undertake a review of how risk, business continuity and emergency preparedness is managed within the Directorate. This will help to ensure they remain in a strong position in relation to business continuity. This is especially important due to the high number of Council critical functions and service that they operate. There are a number of plans which will need updating in quarter four.
- Although there are only two plans for the Deputy Chief Executive Directorate both represent significant and critical services. The ICT plan that is out of date is currently being updated.
- Governance and Regulatory Services are fully reviewing the number of plans to bring the department up to date.
- Places have a significant number of plans that are around or just over 12 months and are due for review. The Directorate retains a strong risk focus and the business continuity programme is well supported by the Risk Champion. However, work will be needed in quarter four to save the Department losing ground.
- The Resources Directorate business continuity plans are fairly up to date. Recently Risk Services have moved to a single plan rather than three separate ones for various services areas. There are only two plans out of date both of which are currently being updated. There is also a significant amount of work being done to further develop the Customer First plan to enhance their arrangements.
- Public Health remains up to date with the single plan for the Directorate.

***Risk and Insurance Performance Indicators***

| PI Ref.<br>(BVPI, Local, PSA) | Performance Indicator<br>(Description of measure)                                                          | 2014/15 Target | 2014/15 Actual |
|-------------------------------|------------------------------------------------------------------------------------------------------------|----------------|----------------|
| RI1                           | Number of new liability insurance claims notified each month.                                              | 30             | 26             |
| RI2                           | Number of liability insurance claims settled each month.                                                   | 35             | 32             |
| RI3                           | Number of liability insurance claims outstanding.                                                          | 550            | 402            |
| RI4                           | Percentage of new insurance claims registered and dispatched to insurers within 3 working days of receipt. | 92%            | 100%           |
| RI5                           | Percentage of property risk audit programme completed (annual target).                                     | 90%            | 67%            |
| RI6                           | Percentage of risk registers revised and up to date at end of quarter.                                     | 90%            | 73%            |

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\*In support of the 73% of risk registers revised and up to date by the end of the quarter the following graph shows a breakdown by department:



- We understand that the officer who usually provides the data for Children’s Services is currently on long term sick and it would appear that the reporting of risk registers has not been picked up in their absence. This is unusual as Children’s Services do usually provide a return.

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**3. Appendix A: Performance & Summary Tables for Quarter 3 – October to December 2014**

*Internal Audit reports issued in period*

| Directorate               | Review Title      | Assurance Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Community and Environment | Waste PFI Project | <p><b><u>Scope:</u></b></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> <li>• The arrangements for ownership change;</li> <li>• That the governance arrangements are robust;</li> <li>• There are adequate financial management arrangements; and</li> <li>• Arrangements for performance monitoring and for delivering savings are adequate.</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>We consider the controls in place around the processes for the Waste Private Finance Initiative at this stage of transition to the revised waste arrangements to be inadequate. There are a number of key developments that are work in progress and some significant improvements to be completed in order to develop the approach. We recognise that the service is aware of these issues and is proactively taking steps to address the gaps.</p> |



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| Directorate            | Review Title                   | Assurance Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Deputy Chief Executive | Staff Benefits                 | <p><b><u>Scope:</u></b></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> <li>• What is being done to develop the staff benefits offer and whether current and potential further staff benefits have a positive impact on employees and local businesses;</li> <li>• That the governance arrangements are robust and working effectively; and</li> <li>• The effectiveness of communication of staff benefits to employees.</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>Overall, we consider the controls in place around the processes for staff benefits to be adequate, with some risks identified and assessed, and some changes required to improve the approach. This includes establishing the importance of developing staff benefits and introducing a formalised process for managing risks around staff discounts.</p>                                    |
| Deputy Chief Executive | Year 7 Junior Savings Accounts | <p><b><u>Scope:</u></b></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> <li>• Governance arrangements and the scheme's compliance with policy.</li> <li>• The processes for the administration of the scheme including compliance with the Data Protection Act.</li> <li>• Promotion of the scheme to students, parents and schools and any other stakeholders aimed at maximising take-up and benefits.</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>Overall we consider that the controls in place are currently inadequate, with some risks identified and assessed and several changes necessary. This is predominately due to the lack of overall policy for the scheme and the limited take-up by Year 7 pupils.</p> <p>The controls in place once a pupil does open an account are adequate and no significant issues have been identified in this area.</p> |

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| Directorate               | Review Title         | Assurance Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|---------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Governance and Regulatory | Bereavement Services | <p><b><u>Scope:</u></b></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> <li>• The procedures regarding the cremation of foetuses and babies;</li> <li>• The general operation of the service including its plans, procedures and processes, including processes around crematoria capacity, public funerals, public announcements, freedom of information requests, notifications and custody of personal property;</li> <li>• Proposals for changes in staffing, roles and responsibilities that may be facilitated by the move to Governance and Regulatory Services Directorate; and</li> <li>• Progress in relation to mercury abatement requirements and participation in the burden sharing scheme.</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>We consider that the controls in place are currently inadequate. A number of procedures have been improved in recent months and there are a number of proposed new procedures. However these have not yet been fully documented and/or agreed by management.</p> |

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| Directorate | Review Title                                        | Assurance Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| People      | Commissioning of Complex Care Packages with the CCG | <p><b><u>Scope:</u></b></p> <p>The scope of our audit was to review:</p> <ul style="list-style-type: none"> <li>• The arrangements that are currently in place for the commissioning of complex care packages with the Clinical Commissioning Group (CCG),</li> <li>• Contract monitoring arrangements for services jointly commissioned by the Council and the CCG.</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>We consider that the controls in place in relation to commissioning of complex care packages with the CCG are inadequate, with some risks identified and assessed and several changes necessary.</p> <p>In particular, we consider that the recording of decisions and procurement arrangements for these packages to be inadequate, with a number of material risks identified and significant improvement required.</p> |
| People      | Boundary School                                     | <p><b><u>Scope:</u></b></p> <p>Compliance testing based on a random sample was carried out in the following areas:</p> <ul style="list-style-type: none"> <li>• Purchasing</li> <li>• Procurement</li> <li>• Petty cash and purchase cards</li> <li>• Income</li> <li>• Payroll</li> <li>• Banking</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>We note that since the School's new Business Manager started in July 2014, the processes and procedures for dealing with income and expenditure have become significantly more robust and appropriate and have recently been documented. Our overall assurance statement is based on the transactions tested over the last 12 months and we therefore assess the results as unsatisfactory.</p>                                                                                             |

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| Directorate | Review Title                           | Assurance Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|-------------|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| People      | Holy Family RC Primary School          | <p><b><u>Scope:</u></b></p> <p>Compliance testing based on a random sample was carried out in the following areas:</p> <ul style="list-style-type: none"> <li>• Purchasing</li> <li>• Procurement</li> <li>• Petty cash and purchase cards</li> <li>• Income</li> <li>• Payroll</li> <li>• Banking</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>We consider that the controls in place are adequate with some control improvements required.</p> <p>Our testing revealed only minor lapses in compliance with the controls.</p>                                                                                                                                                                                                                                 |
| Resources   | Carbon Reduction Commitment Compliance | <p><b><u>Scope:</u></b></p> <p>This compliance based review of the Council’s carbon reduction commitment submission for 2013/2014 was based on guidance provided by the Chartered Institute of Public Finance and Accountancy (CIPFA). There is an annual requirement for an internal audit of the scheme to be carried out and copies of associated audit reports should be provided in the authorities evidence pack.</p> <p><b><u>Assurance Statement:</u></b></p> <p>We consider that the controls in place for the Carbon Reduction Commitment Scheme are good. Most risks have been identified and assessed and we consider that only minor control improvements are required.</p> <p>Our testing revealed a satisfactory level of compliance with the controls.</p> |

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| Directorate | Review Title | Assurance Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|-------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Resources   | E-Invoicing  | <p><b><u>Scope:</u></b></p> <p>The scope of our review was as follows:</p> <ul style="list-style-type: none"> <li>• Preparedness for future legal requirements to accept and provide e-invoicing;</li> <li>• The current levels of compliance with e-invoicing procedures;</li> <li>• The roll-out and operation of the Finance Process Manager (FPM) system;</li> <li>• The levels of invoices still issued or received in paper format and ascertain the reasons for this; and</li> <li>• The levels of orders that have been raised retrospectively and reasons.</li> </ul> <p><b><u>Assurance Statement:</u></b></p> <p>Progress is being made in terms of the roll-out of e-invoicing across the Council however there are still a number of services using paper invoices. Particular areas of concern include Property and Asset Management who are not yet compliant and Stores where current processes do not require a second officer to authorise each order.</p> <p>Overall, we consider the controls in place for e-invoicing to be adequate. However, we do have concerns about compliance in some service areas and also security of the FPM system and therefore we have assessed these areas as inadequate.</p> |

***Progress with Priority 1 audit recommendations***

There are a number of outstanding recommendations which have either not yet been fully implemented or a response is still required from the service area.

We are working with each of the service areas to ensure that actions are fully implemented and will follow-up each of the above actions to check progress in quarter four of this financial year.

***Benefit overpayment recovery rates***

Current performance for the value of all overpayments recovered this year compared to those raised this year is 54.37%.

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### *The Regulation of Investigatory Powers Act 2000*

In line with best practice it has been agreed that the Council will report to the Finance and Audit Committee the number of RIPA authorisations undertaken each quarter which enables the Council to undertake directed and covert surveillance. Between October and December 2014 the Council authorised no directed surveillance reported to the Governance and Regulatory Directorate.

### *Complaints in relation to benefit fraud investigations*

Within the quarter we received one complaint relating to staff conduct. The complaint was investigated and not upheld as it was considered that the staff member had acted appropriately.

### *Benefit fraud referrals*

An analysis of the benefit fraud cases to date in 2014/2015 has been included at **Appendix B**. This includes details of the referral source for cases opened and closed in 2014/2015.

### *Insurance claims data*

Statistics in relation to insurance claims are collated on a quarterly basis and details of the latest information can be seen in **Appendix C** of this report.

Please note that for the period 2012 to 2014 the policy ran for an 18 month period whilst arrangements were made to align all policy dates to a 1<sup>st</sup> April start in preparation for the procurement exercise.

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**4. Appendix B Benefit Fraud Referrals – Analysis of Cases Opened and Closed to date**

**Cases Opened – Fraud Referral Source**

|                                      | <b>Benefit Section</b> | <b>Data Matching</b> | <b>DWP</b> | <b>Fraud Team</b> | <b>Other External</b> | <b>Other Internal</b> | <b>Public</b> | <b>Fraud Hotline</b> | <b>Verification Framework Activities</b> | <b>Total</b> |
|--------------------------------------|------------------------|----------------------|------------|-------------------|-----------------------|-----------------------|---------------|----------------------|------------------------------------------|--------------|
| No. of referrals received            | 133                    | 249                  | 62         | 20                | 7                     | 158                   | 166           | 35                   | 23                                       | 853          |
| No. of new referrals                 | 2                      | 0                    | 0          | 0                 | 0                     | 2                     | 2             | 1                    | 1                                        | 8            |
| No. of cases passed to DWP           | 37                     | 1                    | 0          | 4                 | 6                     | 107                   | 40            | 14                   | 1                                        | 210          |
| No. of cases passed to Visiting Team | 17                     | 0                    | 3          | 0                 | 6                     | 37                    | 35            | 11                   | 0                                        | 109          |
| No. of cases not investigated        | 18                     | 4                    | 4          | 3                 | 1                     | 13                    | 15            | 2                    | 1                                        | 61           |

**Cases Closed– Fraud Referral Source**

|                                      | <b>Benefit Section</b> | <b>Data Matching</b> | <b>DWP</b> | <b>Fraud Team</b> | <b>Other External</b> | <b>Other Internal</b> | <b>Public</b> | <b>Fraud Hotline</b> | <b>Verification Framework Activities</b> | <b>Total</b> |
|--------------------------------------|------------------------|----------------------|------------|-------------------|-----------------------|-----------------------|---------------|----------------------|------------------------------------------|--------------|
| No. of cases closed                  | 168                    | 262                  | 84         | 39                | 17                    | 202                   | 177           | 35                   | 11                                       | 995          |
| No. of cases passed to DWP           | 38                     | 1                    | 0          | 4                 | 6                     | 76                    | 76            | 14                   | 1                                        | 216          |
| No. of cases passed to Visiting Team | 17                     | 0                    | 3          | 0                 | 6                     | 42                    | 36            | 11                   | 0                                        | 115          |
| No. of cases not investigated        | 21                     | 6                    | 4          | 8                 | 1                     | 15                    | 17            | 2                    | 1                                        | 75           |

Blackpool Council: Risk Services

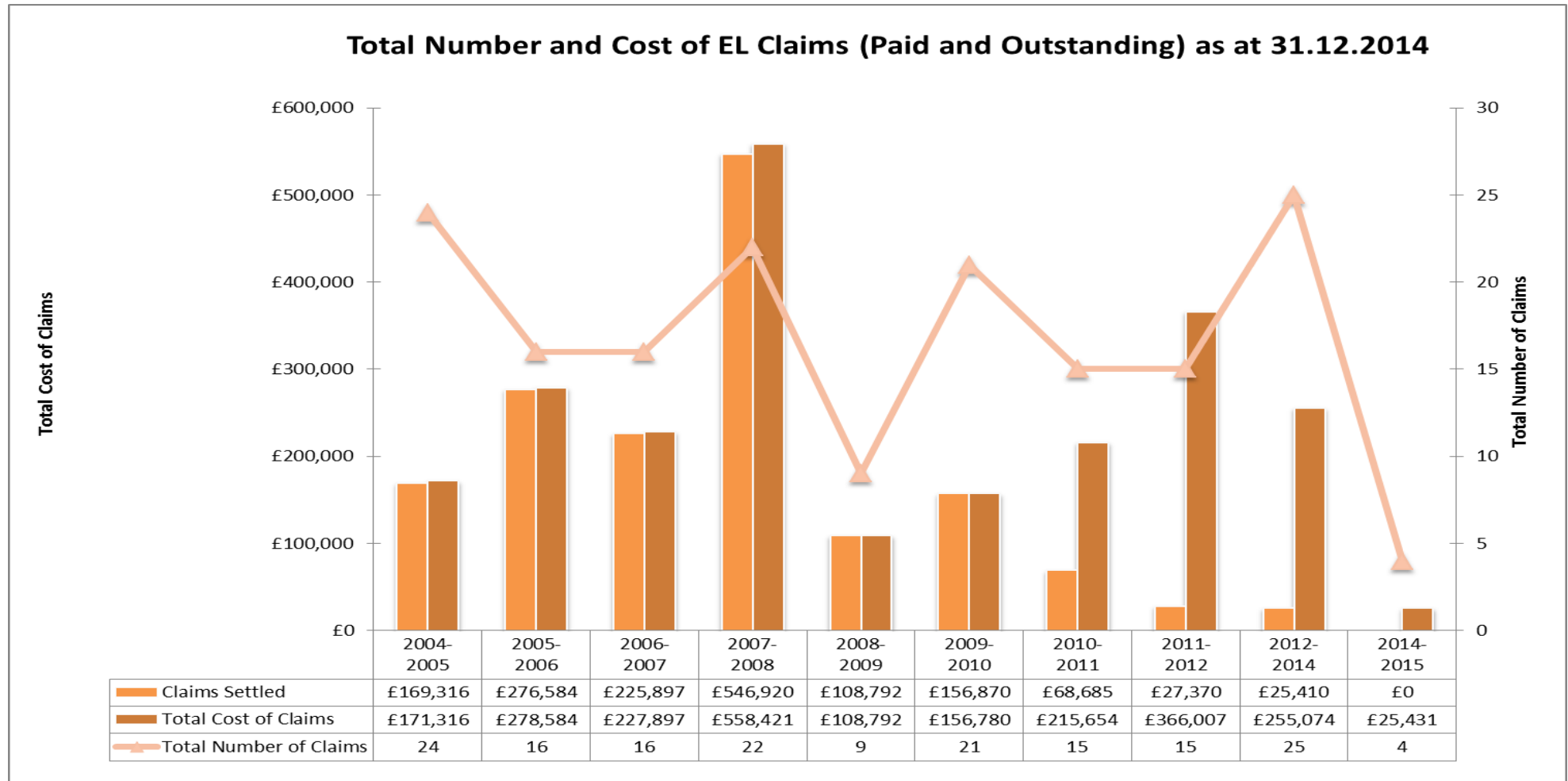
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|                                  | <b>Benefit Section</b> | <b>Data Matching</b> | <b>DWP</b> | <b>Fraud Team</b> | <b>Other External</b> | <b>Other Internal</b> | <b>Public</b> | <b>Fraud Hotline</b> | <b>Verification Framework Activities</b> | <b>Total</b> |
|----------------------------------|------------------------|----------------------|------------|-------------------|-----------------------|-----------------------|---------------|----------------------|------------------------------------------|--------------|
| No. of investigations undertaken | 93                     | 254                  | 77         | 27                | 4                     | 69                    | 48            | 8                    | 9                                        | 589          |
| No. of no fraud cases            | 38                     | 83                   | 20         | 16                | 3                     | 44                    | 28            | 4                    | 6                                        | 242          |
| No. of positive cases in period  | 55                     | 171                  | 57         | 11                | 1                     | 25                    | 20            | 4                    | 3                                        | 347          |
| No. of prosecutions in period    | 2                      | 7                    | 25         | 0                 | 0                     | 0                     | 2             | 0                    | 1                                        | 37           |
| No. of admin penalties in period | 6                      | 12                   | 7          | 0                 | 0                     | 2                     | 3             | 0                    | 0                                        | 30           |
| No. of cautions in period        | 33                     | 75                   | 7          | 3                 | 1                     | 10                    | 7             | 2                    | 1                                        | 139          |

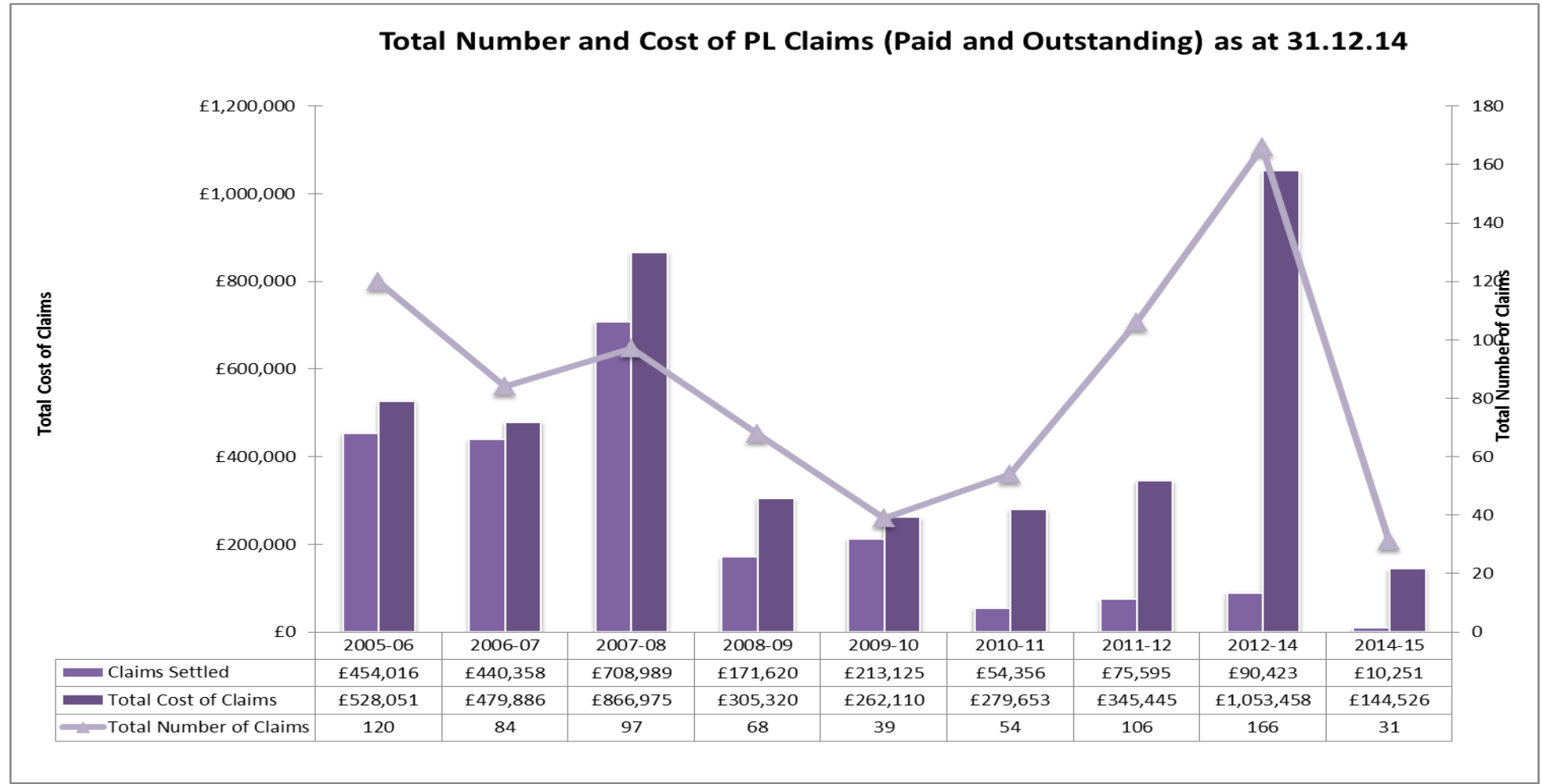


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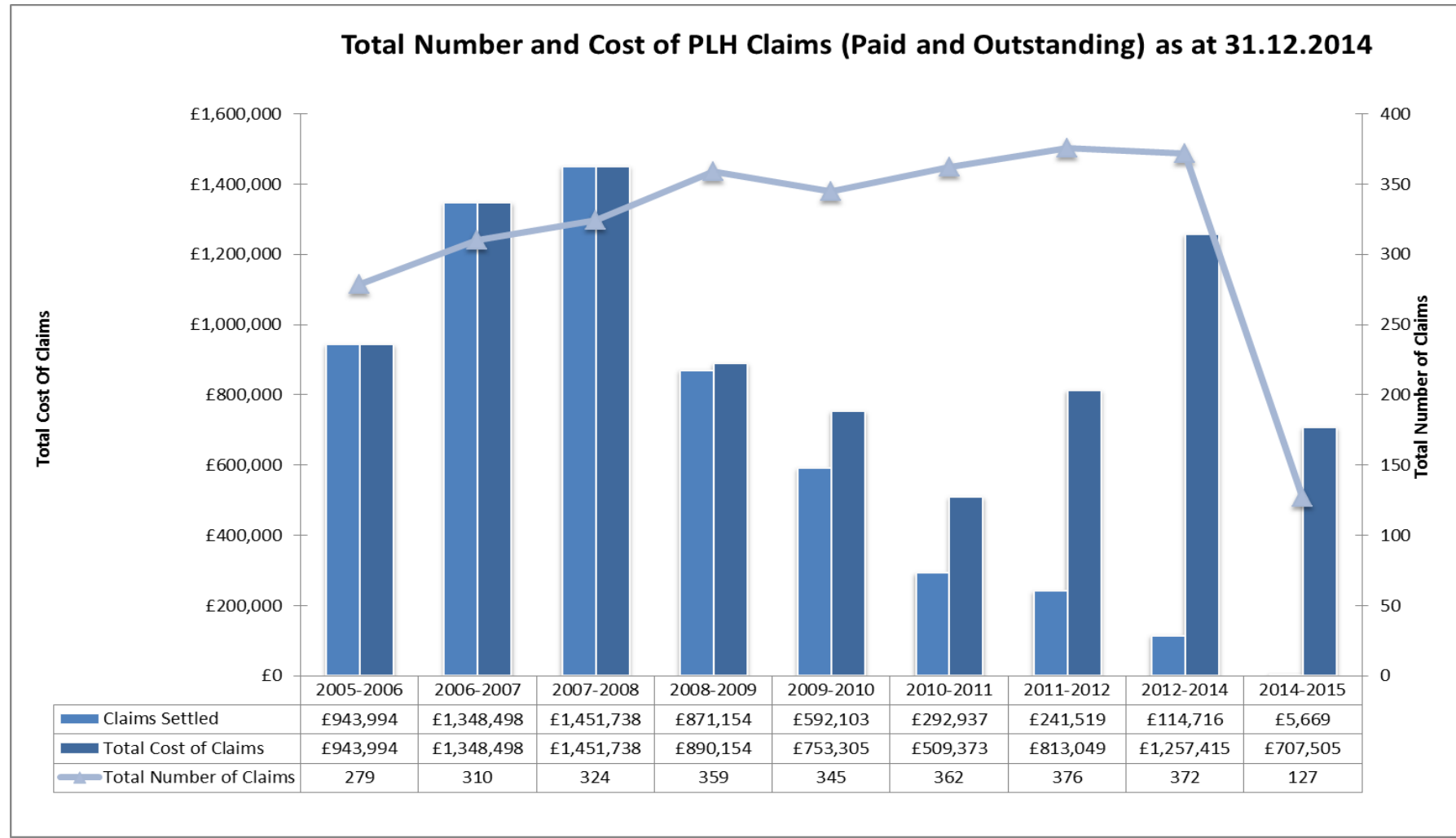
**5. Appendix C – Insurance Claims Data**



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**Appendix D – Benefit Overpayments Year on Year Analysis (Housing Benefit and Council Tax Benefit Only)**

|              | 2012/2013          |                         | 2013/2014            |                         | 2014/2015 (to date) |                         |
|--------------|--------------------|-------------------------|----------------------|-------------------------|---------------------|-------------------------|
|              | Overpayment        | % Overpayment Recovered | Overpayment          | % Overpayment Recovered | Overpayment         | % Overpayment Recovered |
| April        | £79,952            | 71.02%                  | £105,802             | 79.57%                  | £75,391             | 58.70%                  |
| May          | £66,143            |                         | £74,306              |                         | £54,175             |                         |
| June         | £29,934            |                         | £133,034             |                         | £108,909            |                         |
| July         | £65,743            | 60.36%                  | £110,318             | 76.99%                  | £97,848             | 58.70%                  |
| August       | £82,391            |                         | £87,044              |                         | £40,451             |                         |
| September    | £38,704            |                         | £74,480              |                         | £130,623            |                         |
| October      | £60,122            | 66.03%                  | £126,444             | 73.18%                  | £82,711             | 54.37%                  |
| November     | £135,974           |                         | £118,364             |                         | £78,626             |                         |
| December     | £60,733            |                         | £68,051              |                         | £56,987             |                         |
| January      | £68,270            | 61.05%                  | £116,065             | 68.62%                  | -                   | -                       |
| February     | £74,356            |                         | £101,136             |                         | -                   |                         |
| March        | £82,415            |                         | £108,588             |                         | -                   |                         |
| <b>Total</b> | <b>£844,737.00</b> |                         | <b>£1,223,632.00</b> |                         | <b>£725,721.00</b>  |                         |