Risk Services Annual Report and Quarterly Report 1st January to 31st March 2015

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1. Annual Audit Opinion

- 1.1 All internal audit reports include an overall opinion and assurance statement. These have been reported on a quarterly basis to the Finance and Audit Committee, and further explanations provided as required.
- 1.2 In 2014/2015 the number of negative assurance statement for internal audit work completed was still significantly higher than before the spending cuts impacted on Local Government. Given the reduced resource available across the Council it is understandable that some controls may have lapsed. However it is important that all managers continue to ensure that a sound control environment is in place for their service area.
- 1.3 All areas which Internal Audit assesses as high risk and where a priority one recommendation has been made are followed up by the Chief Internal Auditor to help ensure these priority areas are addressed. The follow-up work undertaken by Internal Audit has confirmed that in the majority of cases appropriate action has been taken and where this is not the case a revised deadline or action has been agreed.
- 1.4 Therefore the opinion of the Chief Internal Auditor is that the overall control environment of the Council is adequate. A number of areas where further improvements to controls would be desirable have been included in the draft Annual Governance Statement. The Annual Governance Statement is approved by the Corporate Leadership Team and the Finance and Audit Committee.
- 1.5 The audit opinion is based on work completed which amounted to 91% of that planned. Best practice is that at least 90% of planned audit work should be completed and this target has been met. The compliance audit programme and all reviews agreed to be of high priority were completed and the Chief Internal Auditor is satisfied the amount of work undertaken is sufficient to enable an informed audit opinion to be drawn.
- 1.6 The Internal Audit Team is required to comply with the Public Sector Internal Audit Standards. A self-assessment by the Chief Internal Auditor has confirmed that the team broadly comply with the standards with some areas of partial compliance which could be developed. An external review of compliance is planned for 2015/2016 to validate this position.

2. Fourth Quarter Summary

Service Developments

2.1 Risk Services

It is with regret to announce the medical retirement of the Council's Senior Auditor in January 2015. Amelia Ford was a valued member of the team for a number of years our thoughts are with Amelia and her family throughout this difficult time.

Throughout the quarter considerable work has been undertaken in order to develop a plan to deliver the required budget savings of £97,900 in Risk Services for 2015/2016 and meet the national objective to transfer all benefit fraud investigation staff to the Department for Work and Pensions by the 1st April 2015.

The project to transfer the benefit fraud investigation staff has been successful and their last day employed by the Council was the 31st March 2015. The team have worked extremely hard during their time at the Council and have delivered some excellent results in the fight against benefit fraud. The staff who transferred were Tony Cooke (Senior Investigator), Mark Dutch (Investigator), Deborah Wills

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(Investigator), Kathlyn Stevens (Investigator), David Jordan (Investigator), Julie Mortimer (Intelligence Officer) and Steve Taylor (Fraud Support Officer). We wish them every success in their new roles at the Department for Work and Pensions.

A revised structure for Risk Services has been agreed and will be implemented as of the 1st May 2015. The service will now comprise of three teams including Internal Audit, Corporate Fraud and Risk & Resilience. The restructure will see the Senior Risk and Insurance Officer, Business Continuity Officer and Emergency Planning Officer take on more generic roles as Risk and Resilience Officers and an increased capacity in Corporate Fraud.

To help facilitate effective working in the new structure the remaining staff members at Municipal Building will be relocated to Bickerstaffe House so that all of Risk Services are based in the same area.

2.2 Internal Audit

As this is the annual report there is a need to report on the progress which the Internal Audit Team has made in terms of delivering the Strategic Audit Plan which spans from 2014 to 2017. To follow is a table which shows the agreed actions and what performance to date has been made:

Action	Progress to Date
To participate in the CIPFA Benchmarking exercise for internal audit services in 2014 and use the findings to help inform the future direction of the internal audit service.	Completed. The results were reported to Finance and Audit Committee on the 27 th November 2014.
Set out the CIA role in good governance and how it fits with the role of others. This should be undertaken in conjunction with the Section 151 Officer, Monitoring Officer, Head of Legal Services, Chief Executive and Finance and Audit Committee and form part of the governance framework.	Outstanding.
Liaise with Human Resources to ensure that an awareness of governance is included in the competencies required by the Corporate Leadership Team.	Outstanding.
The Internal Audit Charter for 2014 should be	Completed.
enhanced to ensure that it fully covers the requirements of the Public Sector Internal Audit Standards.	The Internal Audit Charter has been revised and was approved by Finance and Audit Committee on the 5 th March 2015.
Arrangements need to be put in place for an	In Progress.
external assessment of the internal audit team to be undertaken every five years by a qualified, independent assessor or assessment team from outside the Council.	It is intended that the external review will take place in 2015/16 and work is currently underway to understand the options available for consideration by Finance and Audit Committee.
Maximise income generation opportunities	In Progress.
through the effective marketing of audit work to wholly owned companies, schools and academies.	The service continues to provide services to schools and academies as required and has also

Action	Progress to Date
	agreed to market services to academies outside of the Blackpool boundary. Work is delivered from some of the wholly owned companies and work is underway to build relationships with those which do not receive a service.
Work with colleagues in ICT to implement a	Completed.
practical and reliable ICT solution for Internal Audit to facilitate efficient working.	All the internal audit team now have a laptop and work from the Windows 7 operating system which facilitates effective flexible working.
Continue to explore different delivery models for	In Progress.
Internal Audit, such as shared services and joint audits with neighbouring authorities, to ensure that value for money continues to be achieved.	Options for this continue to be explored and arrangements are already embedded to undertake joint audits with Fylde Borough Council for reviews of shared services. Provisional talks have also been held with Health to implement joint audits where appropriate going forward.
Upgrade the file interrogation software (IDEA)	Completed.
used by the team which will increase efficiency by helping target transactions by exception and automate elements of audit testing. All team members should also be trained in the use of IDEA so that this can be utilised wider than compliance work.	The file interrogation software has been successfully upgraded and all team members received training in September 2014.
Enhance the proactive fraud plan to include a	Completed.
wider remit to utilise the skills of the Corporate Fraud Officer.	The Proactive Fraud Plan has been revised and was approved by Finance and Audit Committee on the 5 th March 2015.
Provide the opportunity for one team member to undertake a computer audit qualification to enhance knowledge and experience in this area.	Outstanding.

2.3 Investigations

A briefing session was held on the 5th January 2015 with school Chair of Governors to raise awareness of fraud risks in schools and to advise them on what services are available to schools to help them ensure that robust controls are in place to help reduce the risk of fraud.

The service has been closely involved in the investigation into a former employee of the Rideability Service who has recently been found guilty of stealing £46,000 from the Council and the Rideability charity. This case has now been referred to Crown Court for sentencing.

The National Fraud Initiative (NFI) data matches for 2015 have now been received with 4,324 matches in total and 1,064 of these flagged as "high risk" to be prioritised for investigation. Risk Services are coordinating the Council's response to dealing with the matches, which cover a wide range of services and data sets.

Under the Local Government Transparency Code (2014) there is an additional requirement to publish on an annual basis further information in relation to fraud investigation undertaken by the Local

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Authority. In order to comply with this it was agreed with the Corporate Leadership Team that this information would be reported on an annual basis in the Risk Services Annual Report and the table below provides the required information for 2014/2015:

Information Recommended for Publication	Council Position
The number of occasions they use powers under the Prevention of Social Housing Fraud (Power to Require Information) Regulations 2014, or similar powers.	None
Number of Counter Fraud Staff Employed by the Authority.	7 Benefit Fraud Investigators and 1 Corporate Fraud Officer
Amount Spent by the Authority on Counter Fraud Work.	£354,271
Number of Fraud Cases Investigated.	Benefit Fraud – 731 Cases
	Corporate Fraud – 8 Cases
Number of occasions on which fraud was	Benefit Fraud – 440 Cases
identified.	Corporate Fraud – 4 Cases (decisions yet to be made on three cases)
Monetary value of the fraud detected and	Benefit Fraud - £1,330,908 (still in recovery)
recovered.	Corporate Fraud - £46,000 (still in recovery)

2.4 Risk Management and Insurance

Work has been underway with the Council's insurers to agree renewal terms for 2015/2016. The insurance programme itself is broadly the same as in previous years with some minor changes taking place.

An independent actuary has been appointed to undertake a review of the Council's self-insurance reserve to help determine whether adequate provision is being made to pay for future claims.

A risk workshop was facilitated for the Blackpool Museum Project and it has been agreed that a number of sessions will be held throughout the life of the project in order to ensure that risks are identified effectively managed.

A verification of the 'My RMEQ' self-evaluation, which assesses the Council's risk management processes, was undertaken by Gallagher Bassett. We are waiting for the report in relation to this verification and steps will be taken to address any recommendations made.

Risk management training was arranged for a number of staff across the Council and provided by Gallagher Bassett. The training hopefully further embeds risk management across the Council by providing employees with the relevant skills to effectively manage risk. The feedback from the training course was generally positive as shown in the following table:

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	Strongly			—	Strongly
	Disagree				Agree
	1	2	3	4	5
The course as a whole was helpful.	0%	0%	7%	45%	48%
Overall, the course aims and					
objectives were met to my					
satisfaction.	0%	0%	7%	54%	39%
The course was relevant to my					
work and will be of practical use.	0%	3%	13%	49%	35%
			ideas of n	ew risk ass	sessment
	technique		n torms of	ite practic	
	Contextualised risk in terms of its practical				
	implications for staff.				
	Provided a good foundation to understand the risk				
	management process.				
	Discussing risk management at team briefings is				
Summary of Comments	good advice.				
•	A polished	d professio	nal sessior	n held by a	highly
	knowledgeable trainer.				
	Some of the concepts were just touched upon and				
	may have been better just mentioning rather than over simplifying.				ther than
	Good opportunity to network and discuss the				
	themes fr	om the tra	ining with	wider colle	eagues.

2.5 Emergency Planning and Business Continuity Planning

The Civil Contingencies Team has been involved in co-ordinating the Council's response to a number of severe weather incidents over the winter months. On 15th January 2015 in particular, although there were no major single incidents, the combination of a significant number of minor impacts did stretch responding officers and available equipment resulting in the Council almost declaring a major incident as a direct result of demand exceeding our response capability.

Negotiations have been undertaken with Lancashire County Council to reduce the amount paid as part of the Service Level Agreement for emergency planning to help meet the budget cuts required for 2015/2016. The major change in service provision is that if a major incident occurs the Force Incident Manager at Lancashire Constabulary will now contact Blackpool Council directly rather than using Lancashire County Council as the single point of contact.

The decision has been taken to cease the Emergency Planning Officer out of hours rota, which was introduced in April 2013, in order to help deliver the required budget savings for 2015/2016. The default position will be that the Council's Standby Duty Officer will coordinate the Council's response to an incident if it is not possible to contact a member of the Civil Contingencies Team on the voluntary call-out list. To help increase resilience it is hoped to extend the number of people on the voluntary call-out list who can provide a tactical response if the incident is particularly significant.

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A Corporate Business Continuity Exercise was facilitated for members of the Corporate Leadership Team and Senior Leadership Team on 5th February 2015. The outcome of this was a number of lessons that will be fed into the revised Corporate Business Continuity Plan and will also inform the changes required to ensure that the Critical Activity List is up to date and fit for purpose.

Business continuity management awareness training was delivered to the Finance and Audit Committee on the 5th March.

The team continue to contribute to the work of the Lancashire Resilience Forum including attending meetings, facilitating exercises, conducting reviews and contributing to the various work streams.

3. <u>Performance</u>

Internal Audit performance indicators

PI Ref.	Performance Indicator (Description of measure)	2014/15 Target	2014/15 Actual
Local IAPI1	Percentage audit plan completed (annual target).	90%	91%
Local IAPI2	Percentage draft reports issued within deadline.	96%	97%
Local IAPI3	Percentage audit work within resource budget.	92%	90%
Local IAPI4 Percentage of positive satisfaction surveys.		85%	82%
Local IAPI5	Percentage compliance with quality standards for audit reviews.	85%	84%

Investigations performance indicators

PI Ref.	Performance Indicator (Description of measure)		2014/15 Actual
Local IPI1	Number of fraud investigations, per 1,000 caseload. (Based on the number of investigation cases divided by the overall number of benefit claims).		28.81
Local IPI2	Number of prosecutions and sanctions, per 1,000 caseload (annual target). (Based on the total number of sanctions obtained divided by the overall number of benefit claims)	11	9.49
Local IPI3	Percentage cases closed resulting in changes to benefit. (Based in the overall number of cases closed by the number of investigations undertaken).	50%	60%

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PI Ref.	Performance Indicator		2014/15
	(Description of measure)	Target	Actual
Local IPI4	Percentage cases closed resulting in changes to benefit with sanctions. (Based on the number of sanctions obtained divided by the number of positive cases investigated).	54%	55%

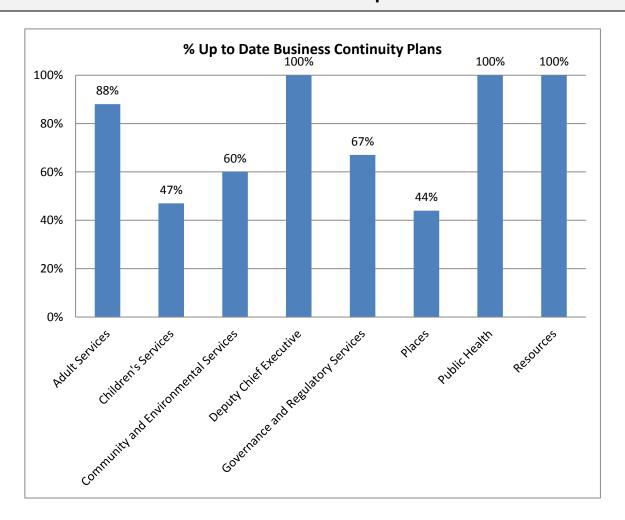
Investigations Team Statistics

	Local	DWP		Sar	nctions	
Month	Authority Overpayment	Overpayment	Cautions	Admin	Completed	+/- Target
	Overpayment			Penalties	Prosecutions	, , ,
January	£61,097	£37,766	14	2	6	0
February	£177,125	£46,864	6	3	5	-7
March	Please note statistics have not been collated for March as the focus was on transferring cases to the DWP as part of the Single Fraud Investigation Service.					
Totals	£238,222	£84,630	20	5	11	-7

Civil Contingencies performance indicators

PI Ref. (BVPI, Local, PSA)	Performance Indicator (Description of measure)		2014/15 Actual
Local CC1	Percentage of Council services with business continuity plans.	100%	86%
Local CC2	Percentage of Council service business continuity plans updated during the financial year.	90%	62%
Local CC3	Number of civil contingency training and exercise sessions held.	6	6
Local CC4	cal CC4 Number of trained Emergency Response Group Volunteers.		45
Local CC5	Number of updates to the Major Emergency Plan.		1
Local CC6	Percentage integration into the Lancashire Resilience Forum workstreams		70%

^{*}In support of the 62% of business continuity plans up to date by the end of the quarter the following graph shows a breakdown by directorate:

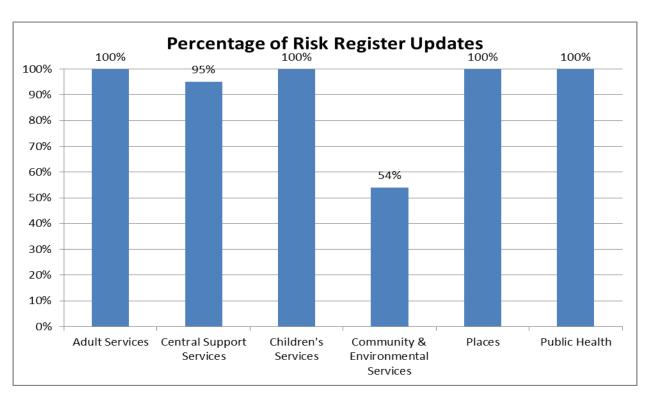


- Adult Services remain in a strong overall position with only a couple of plans outstanding. The majority of plans will be 12 months old by August 2015.
- Children Services have made significant progress since the Quarter 3 report with a significant number of plans completed. Although there is still a number of outstanding plans there is a commitment from the Department to complete these over the next reporting period.
- Community and Environment Department have been in a strong position in relation to business
 continuity and it is vital that this remains so given the high number of Council critical functions and
 services that they operate. The department is currently at the maximum edge of the validity of a
 significant number of plans which will need addressing going in to the new reporting year (April 2015).
- Governance and Regulatory Services are fully reviewing the number of plans to bring the department up to date.
- Places have been in a strong position but many of the plans are now becoming out of date. The Visitor Economy area of the department has performed well in updating their plans.

Risk and Insurance Performance Indicators

PI Ref. (BVPI, Local, PSA)	Performance Indicator (Description of measure)		2014/15 Actual
RI1	Number of new liability insurance claims notified each month.	30	24
RI2	Number of liability insurance claims settled each month.	35	34
RI3	Number of liability insurance claims outstanding.		410
RI4	Percentage of new insurance claims registered and dispatched to insurers within 3 working days of receipt.		100%
RI5	Percentage of property risk audit programme completed (annual target).		100%
RI6	Percentage of risk registers revised and up to date at end of quarter.		88%

^{*}In support of the 88% of risk registers revised and up to date by the end of the quarter the following graph shows a breakdown by department:



4. Appendix A: Performance & Summary Tables for Quarter 4– January to March 2015

Internal Audit reports issued in period

Directorate	Review Title	Assurance Statement
Corporate	Local Education Partnership	Scope: The scope of the review included: Completed Local Education Partnership Programmes to ensure that they were delivered effectively and key performance indicators were met, Governance arrangements for the Local Education Partnership to ensure that they are fit for purpose in the event that more corporate projects may be delivered through the partnership, Action taken to address relevant recommendations included in the 2010/2011 internal audit review of Building Schools for the Future to ensure that agreed actions are appropriately addressed. Assurance Statement: We consider that the controls in place are inadequate, with a number of material risks identified and assessed, and significant improvement required, particularly in relation to governance and monitoring arrangements, and revising the membership of the LEP Programme Board on the client side and the LEP Board on the delivery side. However, evidence demonstrates that projects achieve value for money and are delivered on time and within the budget and therefore we consider the controls in relation to project delivery to be adequate. We consider that the potential expansion of the Local Education Partnership to deliver capital projects outside of the remit of Children's Services should be agreed corporately before being pursued further. Further involvement of other relevant key stakeholders, including support from the Corporate Procurement Team and Legal Services must be secured to ensure that procedural requirements are followed.

Directorate	Review Title	Assurance Statement
People	Framework-i	Scope: The scope of the review included: Controls around residential care and nursing care payments to assess whether these are effectively implemented, Assessment and care management controls following recent changes to the processes, in particular whether the new processes are compatible and compliant with the local scheme of delegation and whether adequate approval points are built into the processes, Issues identified from the dual payment run undertaken as part of the Phase 2 project testing, and how these have been resolved, and Action taken to address relevant priority one recommendations included in the 2013/2014 internal audit review of Commissioning of Children Social Care External Placements to ensure that decisions made and evidence of authorisation are recorded on the Framework-i system. Assurance Statement: We consider that the controls in place are currently inadequate, with a number of risks identified and improvement required. This is partially a reflection of the timing of this review given that a number of current cases examined were administrated under historic processes and the plan for clearing the backlog of case reviews is still in progress. A number of processes are in place that help to mitigate some of the risks identified. Our testing revealed some lapses in compliance with the controls.

Directorate	Review Title	Assurance Statement
People	Marton Primary School	Scope: Compliance testing based on a random sample was carried out in the following areas: Purchasing Procurement Petty cash and purchase cards Income Payroll Banking Assurance Statement: We consider that the controls in place are adequate with some control improvements required. Our testing revealed minor lapses in compliance with the controls.
People	St John's Church of England Primary School	Scope: Compliance testing based on a random sample was carried out in the following areas: Purchasing Procurement Petty cash and purchase cards Income Payroll Banking Assurance Statement: We consider that the controls in place are adequate with some risk identified and assessed but several changes necessary. Our testing revealed minor lapses in compliance with the controls.

Directorate	Review Title	Assurance Statement
People	St Kentigern's Primary School	Scope: Compliance testing based on a random sample was carried out in the following areas: Purchasing Procurement Petty cash and purchase cards Income Payroll Banking Assurance Statement: We consider that the controls in place are adequate with some risks identified and assessed, several changes are necessary. Our testing revealed minor lapses in compliance with the controls.
People	Highfurlong School	Scope: Compliance testing based on a random sample was carried out in the following areas: Purchasing Procurement Petty cash and purchase cards Income Payroll Banking Assurance Statement: We consider that the controls in place are adequate with some risks identified and assessed and several changes necessary. Our testing revealed minor lapses in compliance with the controls.

Directorate	Review Title	Assurance Statement
People	Our Lady of Assumption Primary School	Scope: Compliance testing based on a random sample was carried out in the following areas: Purchasing Procurement Petty cash and purchase cards Income Payroll Banking Assurance Statement: We consider that the controls in place are adequate with some risks identified and assessed and several changes necessary. Our testing revealed minor lapses in compliance with the controls.
People	Woodlands School	Scope: Compliance testing based on a random sample was carried out in the following areas: Purchasing Procurement Petty cash and purchase cards Income Payroll Banking Assurance Statement: We consider that the controls in place are good with most risks identified and assessed and minor control improvement required. Our testing revealed minor lapses in compliance with the controls.

Directorate	Review Title	Assurance Statement					
Public Health	Public Health Integration	Scope: The scope of our audit review included: • The service's continued movement towards integration with other Council services; and • Perform case studies of services which are now well integrated with Public Health and of those which have yet to integrate effectively, to identify effective processes for engaging with services going forward. Assurance Statement: We consider the controls in place around the processes for public health integration to be good. There are some minor improvements to be completed in order to further develop the approach.					

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Directorate	Review Title	Assurance Statement						
		Scope:						
		The scope of the audit work was to review:						
		The system of supervisory checks						
		Valuation and liability including communication links with the planning department						
		System access and user permissions						
		Suspense accounts						
		Processes in relation to void properties						
		Promptness of billing						
		Performance targets						
Resources	Council Tax	Scheme of delegation and write off procedures						
		Customer service information flow						
		 Follow-up of recommendations from the joint review of council tax and business rates collection in 2013/14. 						
		The audit was carried out jointly by Blackpool and Fylde Borough Councils Internal Audit Teams, as part of the ongoing partnership work across both Councils.						
		Assurance Statement:						
		We consider that the controls in place are good, as most risks are identified and assessed, and only minor control improvements are required.						

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 the new financial year where a detailed review will be undertaken in terms of actions implemented.

Benefit overpayment recovery rates

Current performance for the value of all overpayments recovered this year compared to those raised this year is 51.91% compared to last year when the percentage was 68.62%.

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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 January and March 2015 the Council authorised no directed surveillance reported to the Governance and Regulatory Service.

Complaints in relation to benefit fraud investigations

Within the quarter we received no complaints in relation to benefit fraud investigation.

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.

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

<u>Cases Opened – Fraud Referral Source</u>

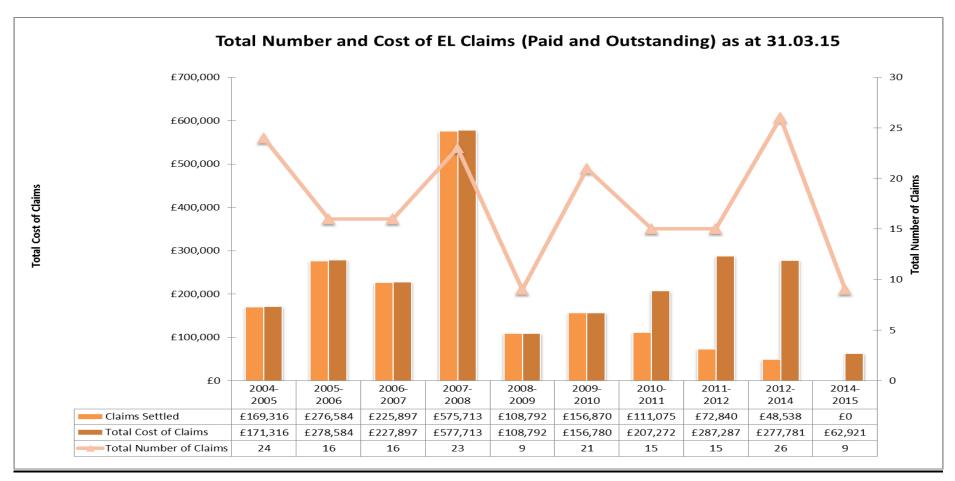
	Benefit Section	Data Matching	DWP	Fraud Team	Other External	Other Internal	Public	Fraud Hotline	Verification Framework Activities	Total
No. of referrals										
received	149	253	83	25	17	175	194	42	18	956
No. of new referrals	1	0	0	0	0	0	0	0	0	1
No. of cases passed to DWP	41	1	0	4	7	78	90	16	1	238
No. of cases passed to Visiting Team	25	0	5	0	6	45	44	14	0	139
No. of cases not investigated	23	4	4	3	1	16	16	3	2	72

Cases Closed- Fraud Referral Source

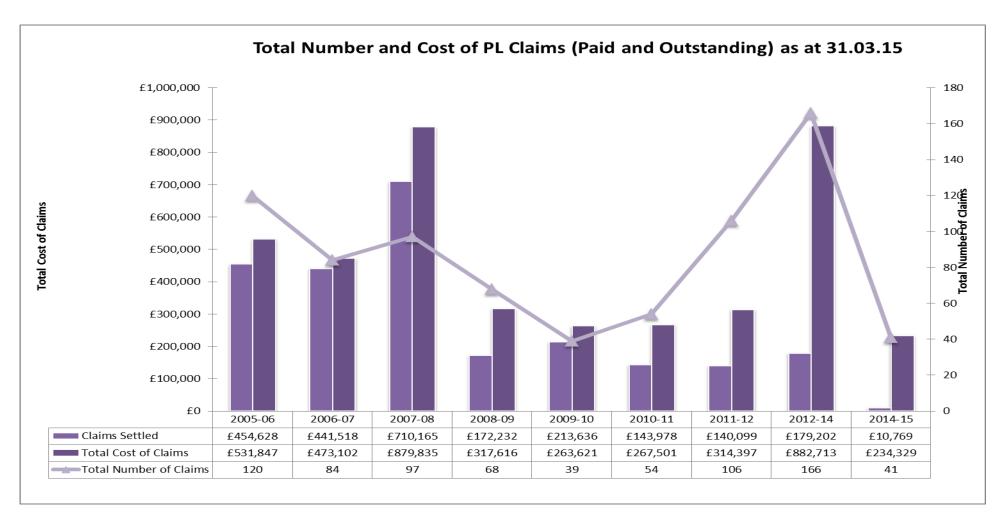
	Benefit Section	Data Matching	DWP	Fraud Team	Other External	Other Internal	Public	Fraud Hotline	Verification Framework Activities	Total
No. of cases closed	196	336	101	47	18	224	221	45	17	1205
No. of cases passed to										
DWP	41	1	0	4	7	83	90	16	1	243
No. of cases passed to										
Visiting Team	25	0	5	0	6	50	45	14	0	145
No. of cases not										
investigated										
	25	7	4	8	1	18	18	3	2	86

	Benefit Section	Data Matching	DWP	Fraud Team	Other External	Other Internal	Public	Fraud Hotline	Verification Framework Activities	Total
No. of investigations										
undertaken	120	313	92	35	4	73	68	12	14	731
No. of no fraud cases	42	105	24	17	3	45	40	5	10	291
No. of positive cases in										
period	63	223	68	18	1	28	28	7	4	440
No. of prosecutions in										
period	3	9	30	0	0	1	3	0	1	47
No. of admin penalties										
in period	6	15	8	0	0	2	4	0	0	35
No. of cautions in										
period	36	90	7	3	1	10	9	2	1	159

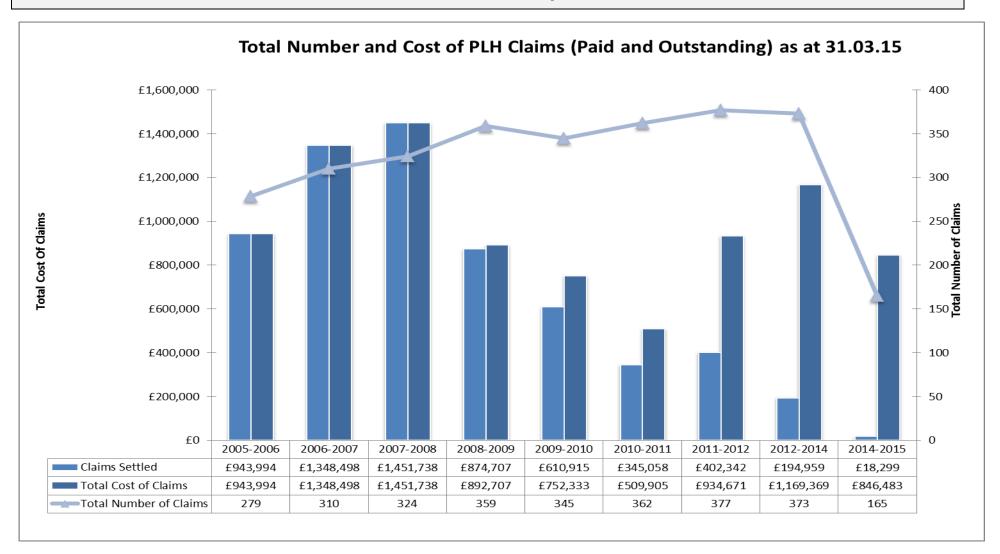
6. Appendix C – Insurance Claims Data



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 1st April start in preparation for the procurement exercise.



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