Audit and Risk Services Quarter One Report 1st April to 30th June 2023

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1. Quarter One Summary

Service Developments

Internal Audit

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

Directorate	Internal Audits		
Adult Services	Preparing for Adulthood		
	 Scheme of Delegation and Authorisation of Packages 		
Children's Services	Children's Services Medium Term Financial Strategy		
	Virtual School		
	Implementation of SEND Inspection		
Chief Executives	Organisational Culture		
Communication and Regeneration	Community Renewal Fund Grant		
Community and Environmental	Stores		
Corporate	 Transparency Code Cost of Living Crisis Support 		
corporate			
	Capital Project Management		
	Use of Consultants		
	Corporate Compliance		
Governance and Partnerships	NHS Data Security and Protection Tool Kit (self-		
Governance and Fartherships	assessment validation)		
	 Dealing with Member / MP Enquires 		
	Whistleblowing		
Resources	Payroll		
Resources	Statutory Property Inspections		
	Business Rates		
Schools	St Johns CoE Primary School		
	Our Lady of Assumption RC Primary School		
	Pupil Referral Unit		

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

We have recently offered the last vacant role in audit to a candidate who we are hoping will join the team in quarter two. This will see the team back to full establishment from September 2023.

Corporate Fraud

The Corporate Fraud Team are continuing to examine results from the National Fraud Initiative Premium Single Person Discount Service. To date, all individuals highlighted as high risk matches have been contacted (where appropriate), resulting in a current 'error rate' of approximately 10% and additional Council Tax liabilities of £21.5k being identified. To date a total of 547 letters have been issued to 279 addresses as part of this exercise. Work has now progressed to contacting those individuals falling within the medium risk category.

Following completion of the necessary training, work is currently underway to update the counter fraud pages of the Council's website.

In conjunction with Civil Enforcement Officers, the Corporate Fraud Team took part in a 'National Blue Badge Day of Action' - the focus being to support genuine badge holders, and challenging individuals

who appeared to be abusing the scheme. Our participation was formally recognised and the positive impact of collaborative efforts praised by the Minister for Roads and Local Transport.

Over 200 Blue Badges were inspected, and whilst the majority were seen to be being used correctly, some misuse was found, with 10 badges being seized, 2 Penalty Charge Notices and 6 misuse letters issued - as a result of an expired badge, use of a deceased person's badge, or the badge holder not being present. Overall, badge holders were pleased to see that the Council were actively supporting disabled motorists. Due to the positive feedback received, and the results from our participation in the national 'day of action', planning is underway to conduct a similar local exercise in the near future.

Risk and Resilience

During the quarter 67% of scheduled risk management groups were held with any postponed meetings now rearranged. Risk workshops have taken place for the ShowTown project, Multiversity Project and Shared Prosperity Fund.

The key priority for the team is the insurance procurement exercise where a tender questionnaire is currently being prepared to ensure covers are in place for the Council and its wholly owned companies from April 2024. A significant amount of information is required to populate the tender questionnaire so the team is focused on collecting this in order to demonstrate how the Council and its companies manage their risk profile.

Work continues on the implementation of the claims handling system with data currently being migrated into the new system. Once complete, further testing will be carried out and it is anticipated that the system will be rolled out in quarter two.

The Corporate Business Continuity Plan has been reviewed and following discussions with the Corporate Leadership Team a review of the critical activities listed is underway to ensure that services are reinstated by priority with some cannot fail services being the priority for resource in the first instance should an incident occur. A revised list will be taken to the Senior Leadership Team in September for review and challenge before final approval is sought from the Corporate Leadership Team.

The online version of the ACT Aware counter terrorism training was rolled out across the Council in the quarter with all staff being encouraged to complete the course.

Health and Safety

The modernisation of the health and safety management system on the Hub is ongoing and covers corporate documentation including the Statement of Intent, Framework, Organising for HandS Work and Guidance Notes and Arrangements. Final checks are being made on the functionality of the SharePoint site and this will be launched across the Council in quarter two. Once launched a review of health and safety pro-formas will be undertaken and these will be added to the new site later in the year.

The roll out of the accident reports system as part of the new HR system has been delayed due to issues found when testing the system. As a result further work is being undertaken with the provider to deal with the issues and then further testing can be carried out before go-live.

In support of the above system development 'How to Guides' are being prepared to ensure that managers can easily navigate the systems to access the information which they require.

A pause has been placed on the delivery of corporate health and safety training in the quarter due to resourcing issues however it is planned that this will be picked up in quarter two. Any urgent training needs are being addressed and bespoke health and safety training and tool box talks are being provided on request to high risk service areas. This includes providing evacuation chair training to a number of settings owned by the Council.

The team continue to deliver services to a number of external organisations which generates an income for the team. These include two of the wholly owned companies, schools (in and out of borough) and Fylde Borough Council.

After a number of staffing changes over the last six months there is now just one vacancy left to fill in the team and a recruitment campaign is currently underway.

Performance

Risk Services performance indicators

Performance Indicator	2023/24	2023/24
(Description of measure)	Target	Actual
Professional and technical qualification as a percentage of the total.	85%	70%

Internal Audit Team performance indicators

Performance Indicator (Description of measure)	2023/24 Target	2023/24 Actual
Percentage audit plan completed (annual target).	90%	16%
Percentage draft reports issued within deadline.	96%	100%
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)	2023/24 Target	2023/24 Actual
Percentage of Council service business continuity plans up to date.	100%	92%
Percentage of risk registers revised and up to date at the end of the quarter.	100%	100%
Number of risk and resilience training and exercise sessions held (annual target).	6	1
Percentage of property risk audit programme completed in the quarter.	100%	100%

The updated information for risk registers is as follows:

Risk Management Group	Percentage updated by end of June 2023	Risk Registers Not Updated
Adult Services	100%	N/A
Central Support Services	100%	N/A
Children's Services	100%	N/A

Communications and Regeneration	100%	N/A
Community and Environmental Services	100%	N/A
Public Health	100%	N/A

The updated information for business continuity plans is as follows:

Directorate	Percentage Updated Within 12 Months	BC Plans Not Updated
Adult Services	92%	Home Care
Chief Executive	100%	N/A
Children's Services	100%	N/A
Communications and Regeneration	81%	Strategic Leisure Assets
Community and Environmental Services	100%	N/A
Governance and Partnerships	100%	N/A
Public Health	100%	N/A
Resources	100%	N/A

Health and Safety performance indicators

Performance Indicator	2023/24	2023/24
(Description of measure)	Target	Actual
RIDDOR Reportable Accidents for Employees	0	0

There were no new RIDDOR cases relating to employees reported in the quarter.

Corporate Fraud Team performance indicators

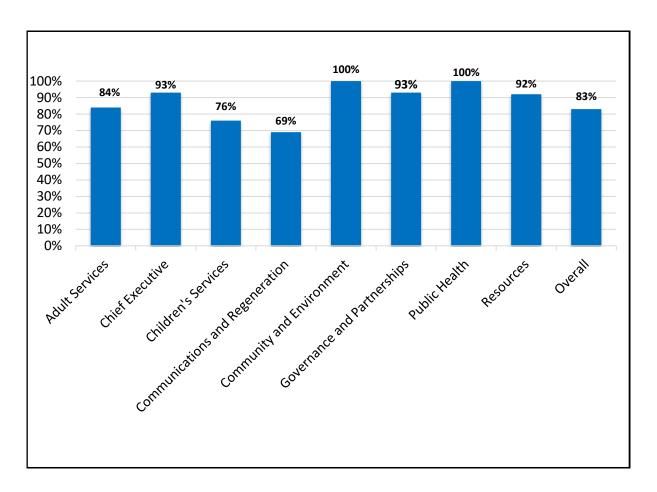
Performance Indicator	2023/24	2023/24
(Description of measure)	Target	Actual
% of agreed Council employees completed i-Pool fraud awareness course.	100%	83%

As at the end of Quarter 1, the overall completion rate has decreased by 1% from last quarter (i.e. 84% to 83%).

An increased level of completion has been noted in both Adult Services (1%) and Governance and Partnerships (2%), although these increases have been offset by reductions in both Communications and Regeneration (1%) and Resources (1%).

Further analysis of the individual completions have shown that there have been a number of staffing changes during the quarter. Our analysis indicates that the majority of staff leavers had previously completed the training, and newly recruited staff are yet to do so. Hence, it is understandable that these Directorate completion percentages have decreased, thereby having an apparent adverse effect on the overall completion rate.

The Corporate Fraud and Investigations Team continue to promote, and monitor the completion of the i-Pool course on a quarterly basis, highlighting to the relevant Chief Officers those mandated members of staff who have yet to complete the course.





2. Appendix A: Performance and Summary Tables for Quarter One

Internal Audit reports issued in period

Directorate	Review Title	Assurance Statement		
Directorate	Review Title	Scope The scope of our audit was to review: • Whether plans are in place to roll out and embers the Community Engagement Framework; • How the authority's Community Engagement Framework compares with similar frameworks; • Whether governance and oversight arrangements are in place to ensure that community engagement activities are carried of appropriately; • Whether appropriate governance arrangement are in place for 'Friends Groups' which have be set up to improve park and green space facilities of the consider that controls relating to Community Engagement are adequate with most risks identified and assessed and some changes necessary. A Blackpool Community Engagement Framework has been produce to encourage a consistent approach to community		
Chief Executives	-	Engagement are adequate with most risks identified and assessed and some changes necessary. A Blackpool Community Engagement Framework has been produced to encourage a consistent approach to community engagement across the authority. Progress is underway to implement the framework and develop the community engagement function.		
		Management Response The Strategy Development P	roposal template will be o raise awareness. earch Manager has th the wholly owned Engagement and omote the framework within otember. mmunications Team in the tation and engagement will be promoted. vernance/Data Protection nsure compliance with	

		Scope		
		The scope of our audit was to	o review:	
		 strategies deployed by shortages and attract The strategies in plact and retention of staff How services engage process; and 	e for succession planning	
		Overall Opinion and Assuran	ice Statement	
		Adeq	uate	
Chief Executive	Recruitment,	The recruitment market is challenging at present and this is reflected as a high risk area in the Strategic Risk Register. However, in terms of processes we consider that the controls in place are adequate in terms of recruitment activities. Recruiting Managers gave positive feedback on the HR team however most believed the processes as they currently stand could be improved, particularly the pre-employment checks. The audit identified that managers believe the recruitment process needs modernising.		
Succession Planning measured albeit th part of the annual determine how we		measured albeit the framewor part of the annual IPA proces determine how well as an org	on planning is not currently centrally reviewed or d albeit the framework and process does form ne annual IPA process. It is therefore difficult to ne how well as an organisation we are actively s, particularly for hard to recruit to roles.	
		Number of Recommendation		
		Priority 1	0	
		Priority 2	5	
		Priority 3	0	
		Management Response		
		The Council has used many d recruitment particularly in ha Workers with good success a that the audit did not identify from external organisations/I not already in place.	nd to fill roles such as Social nd it was pleasing to note y any further innovation	
		Some managers have express taken to undertake our range employment checks and whil are an essential and importar process.	e of comprehensive pre- st this can take time these	
		We will work with a group of there is scope for any further recruitment process in additi	improvements to the	

Directorate	Review Title	Assurance Statement
		which has already taken place. Training on the recruitment process will also be developed and provided to all recruiting managers so that they better understand their responsibilities.
		Succession planning is a service responsibility and forms part of the annual IPA process. It is not currently centrally reviewed or measured and an audit on succession planning has been included on the Audit Plan for 2023/2024.
		The refresh of the Workforce Development Strategy has been delayed due to Covid and the implementation of a new HR and Payroll system but this will be reviewed in the next twelve months.

Directorate	Review Title	Assurance	Statement						
		 of the Heritage Servic The management and Whether a clear plan the activities and ass The funding arranger 	in relation to the transition ce to the new company; d governance arrangements; is in place which identifies ociated timescales required; ments for the new company; place for the current and are of the heritage acts.						
Communication and	Heritage Service Transition	InadequateThe physical fit out of the interior and exhibition of themuseum is currently underway. However, the recentresignation of the Chief Executive and subsequentretirement of the Head of Heritage Services has thepotential to increase the risk of further delays. Wetherefore consider the controls are presentlyinadequate. We do however appreciate that there issome time prior to the opening of the attraction toresolve the outstanding issues.Number of Recommendations Made							
Regeneration	Transition	Priority 1	2						
		Priority 2	5						
		Priority 3	3						
		Management Response							
		The Business Plan has now been updated and is a sign off by the Board at their next meeting.							
		A new CEO has now been app up the role in September 202 out to appoint additional boa	3. The advert has also gone						
		The transfer of staff will be co activities which will be led by transferring staff will also be							
		The legal team will be consulted to ensure ownership rights of the heritage collections are clearly stated in the SLA and fully understood by the new company.							
		A plan will be developed to e collections are protected upo and consideration given to ho what responsibility will be pla for ensuring appropriate eme are in place.	on their return from storage ow this can be achieved and aced on the new company						

Directorate	Review Title	Assurance	Statement					
Directorate	Review Title	Assurance Statement Scope The scope of our audit was to review: • Oversight and governance of enforcement activities including policies and procedures; • Business and consumer advice including maintenance of the approved contractor list; and • Whether statutory functions are being dealt with in a timely manner and given priority over non-statutory duties. Overall Opinion and Assurance Statement We consider that the controls in place are adequate some risks identified and assessed, several changes						
	Trading Standards		essed, several changes sing is required in the system ards Team and the service he data entry process to ncy.					
		The Trading Standards and Licensing Manager will establish when the next weights and measures return due so that there is sufficient time to procure the servi from another authority and the return is submitted in a timely manner. The divisional risk assessment exercise will be conclude The service will liaise with the Data Protection Officer s that records which fall outside of the retention schedu can be deleted.						
		The service will review the options available to them in terms of utilising other case management systems or liaise with the current provider to streamline the curre system so a more consistent approach can be applied.						
		The service will review the usage of the Safe and Secure Directory by obtaining the number of web page hits to determine whether or not this service should continue t be provided or streamline the offering.						

Directorate	Review Title	Statement	
Directorate	Review Title	 relating to NEET are u defined; How Council Services address NEET, and ensate met; and Partnership arrangem 	review: s roles and responsibilities nderstood and clearly work together to help sure that statutory duties tents between the Council h as the Job Centre and the ce Statement od in place relating to the sponsibilities regarding published Ofsted report ements in the support ndividual level in creating le to access education, s area of Children's Services esult. ers work together to to NEET young people in raining and employment, nce to the Council's <u>s Made</u> 0 0 3 undertaking a review in ers to school age offenders ducational hours. t how Council managers link into the Platform to mapping the various roles iated provisions in place to

Directorate	Review Title	Assurance Statement								
Directorate	Review Title	Assurance Statement Scope The scope of our audit was to review: • Current practice and process to secure social value; • Effectiveness of community stakeholder engagement; • Data collection, monitoring and evaluation; and • Capacity and resource allocated. Overall Opinion and Assurance Statement We consider that the controls in place are adequate with some risk identified and assess, several changes necessary. It is recognised that better monitoring of outcomes is required, this is currently being assessed and new operating arrangements are to be introduced to help alleviate the current issues. Number of Recommendations Made Priority 1 0								
		Priority 2	4							
		Priority 3	3							
Corporate	Social Value	Management ResponseThe procurement guidance will be updated in line with the new legislation and will include a detailed social value guide for officers procuring, goods, services or works.Steps will be taken to determine whether staff working within social value should be accredited.								
		The Social Value policy will be this will include an evaluation outcomes. This process will in	n of social value delivery and							
		The Corporate Social Value Group and Social Value Coordinator will continue to engage on any key strategies and plans to ensure social value is adequately covered.								
		A timetable will be established to identify Social Value Champions. More joined up working between social value and community engagement will be undertaken.								
		The Social Value Coordinator will ensure that work in relation to social value remains aligned to the Department of Levelling Up, Housing and Communities guidance on Best Value and Social Value.								

		Scope							
		The scope of our audit was to	o review:						
			 IT Helpdesk raised iss The effectiveness of system (including the return of devices); ar The activity being un 	the device management e issue, repair, recycling and					
		Overall Opinion and Assurance Statement Split Assurance							
		We consider that the controls in place are adequate overall with some risks identified and assessed and a few changes recommended in terms of documenting process. It should also be ensured that communication methods within the ICT team are improved to ensure that staff covering Helpdesk functions are familiar with process changes.							
		Our testing identified concerns regarding the controls relating to the return of devices following users leaving the authority, and this element of the scope has therefore been assessed as inadequate.							
Resources	IT Help Desk and Device Management	Number of Recommendations Made							
	Device Management	Priority 1	1						
		Priority 2	3						
		Priority 3	4						
		Management Response							
		There is a failure of line mana Where devices have not been off-boarding team has been a contacting line managers. Th return devices will also be rai Leadership Team.	n returned a member of the assigned the task of e need for line managers to						
		Leaver's accounts and devices should be deactivate their last working day. There is a process in place for therefore the incident identified in audit testing in the account was not disabled is being investigated							
		The device return procedure will incorporate aspects of the mobile phone device return process.							
		The prioritisation of incidents reported to the help desk is being considered as part of the triage process.							
		Experienced staff members v of the induction meeting for as be encouraged to spend ti closer with less experienced	new staff members, as well me in the office to work						

Directorate	Review Title	Assurance Statement
		The updating of documented procedures is being completed by the Change Team.

Progress with Priority 1 audit recommendations

One priority one recommendation was implemented in the quarter:

• Heritage Service Transition x 1

A number of priority one recommendations which were due in the quarter have had their deadline extended following discussion between the relevant Head of Service and the Head of Audit and Risk. There has been no movement on these since June Audit Committee as the revised deadlines fall into quarter two. Therefore, it is anticipated that a number of these outstanding issues will be resolved by the next quarterly report. These include:

- Water Self-Supply x 1
- Managing the Leavers Process x 1
- CCTV x 1
- Animal Health Outbreak Management x 1
- Track Maintenance Programme x 1
- Wholly Owned Companies Governance Arrangements x 1
- Energy Management x 2
- Cyber Security (Data Infrastructure) x 1
- Highways Enforcement x 1
- Commissioning x 1
- Children's Services Financial Systems x 5
- Illuminations x 1

A number of priority one recommendations have been made which are not yet due for implementation and these include:

- Driving at Work x 3
- IT Help Desk and Device Management x 1
- Heritage Service Transition x 1

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 April 2023 and June 2023, the Council authorised no RIPAs.

Fraud and Error Data

The fraud and error statistics can be found in Appendix B.

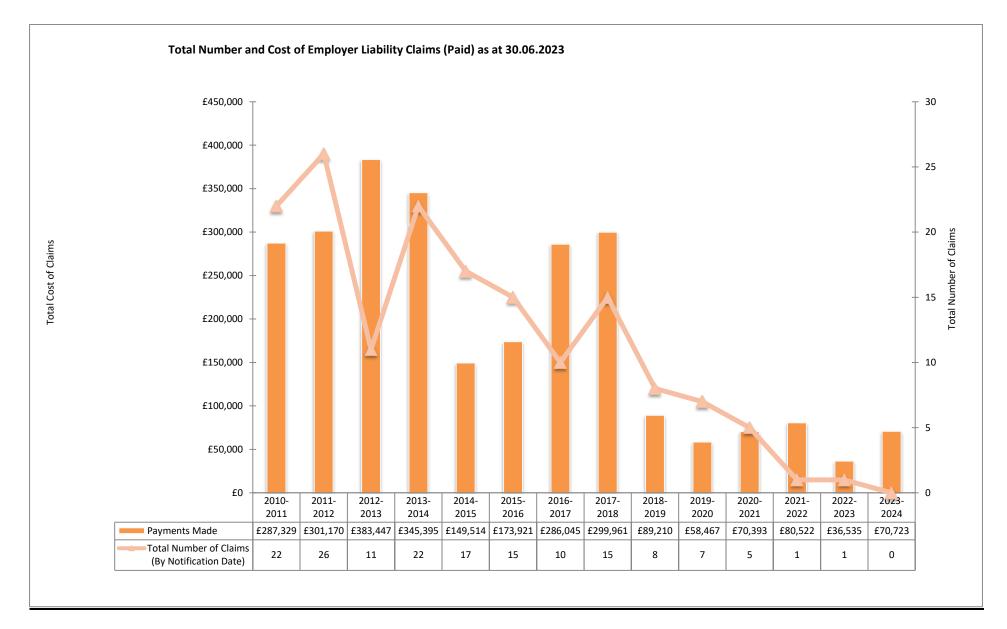
Insurance claims data

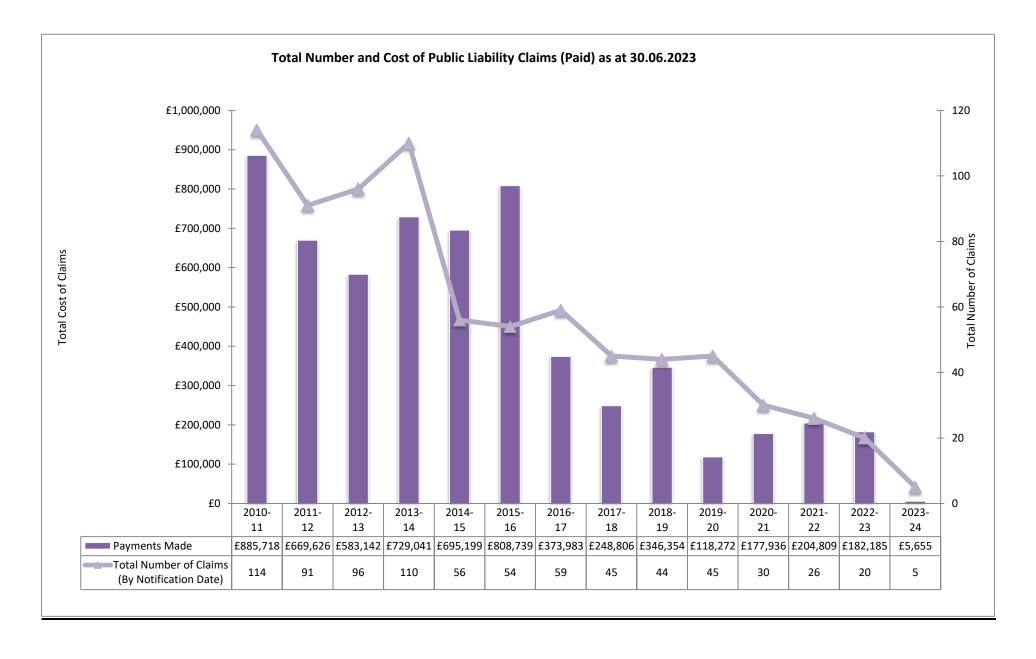
The graphs at Appendix C show the cost of liability insurance claims paid to date during each financial year by the Council.

3. Appendix B - Fraud and Error Statistics 2023/24

			Refer	rals Recei	ved		Case Closures									Actio	on Tak C	en on ases	Close	d	nder
<u>CORPORATE FRAUD AND</u> ERROR STATISTICS 2023/2024	Number of Cases Brought Forward from 2022/2023	Internal	External	RFI	Total Number of Referrals Received	Fra	Fraud Proven			Error Proven			Fraud Identi	/ Error fied	Total Value of Fraud Proven / Error Identified	No Further Action	Recommendation	Disciplinary	Administrative Penalty	Prosecution	Number of Cases Currently Under Investigation
					•	Int	Ext	NFI	Int	Ext	NFI	Int	Ext	NFI							z
TYPE OF FRAUD									A	NNUAL	SUMN	IARY 2	2023 /	2024	1						
Council Tax – Single Person Discount	7	7	6	-	13	-	-	-	4	-	-	3	1	-	£2,692.55	8	-	-	-	-	12
Council Tax Reduction (CTRS)	15	4	3	534	541	-	-	-	2	-	1	9	-	108	£13,211.18	120	-	-	-	-	436
Housing Benefit Claims	-	-	-	49	49	-	-	-	-	-	-	-	-	22	-	22	-	-	-	-	27
Housing Tenants	-	1	-	97	97	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	97
Payroll	5	3	-	157	160	3	-	-	-	-	-	-	-	15	-	15	-	3	-	-	147
Business Rates	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4
Procurement	-	-	-	5,296	5,296	-	-	-	-	-	-	-	-	20	-	20	-	-	-	-	5,276
Fraudulent Insurance Claims	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Social Care	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-
Abuse of Position – Financial Gain	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Abuse of Position – Data	2	-	-	-	-	1	-	-	-	-	-		-	-	-	-	-	1	-	-	1
General Financial Fraud	12	1	4	-	5	-	-	-	-	-	-	2	3	-	-	5	-	-	-	-	12
Blue Badge/Travel Concession/Resident Parking	2	-	1	1,227	1,228	-	-	-	-	-	334	-	-	891	£123,200.00	1,225	-	-	-	-	5
Housing / Right to Buy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Premium Council Tax Exercise (SPD/CTRS)	-	-	-	31,083	31,083	-	-	-	-	-	41	-	-	355	£21,417.53	396	-	-	-	-	30,687
TOTALS	49	15	14	38,443	38,472	4	-	-	6	-	376	14	4	1,411	£160,521.26	1,811	-	4	-	-	36,706

4. Appendix C – Insurance Claim Payments by Financial Year

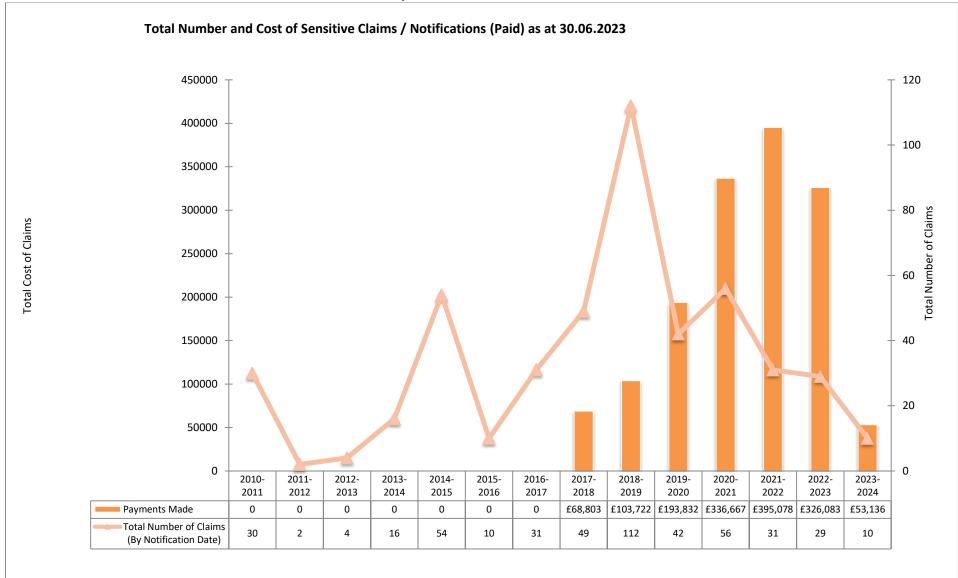




Appendix 6(a)



Appendix 6(a)



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