Audit and Risk Services Quarter Three Report 1st October to 31st December 2023

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1. Quarter Three Summary

Service Developments

Internal Audit

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

Directorate	Internal Audits	
Children's Services	 Implementation of SEND Inspection High Cost Placements / Sufficiency Implementation of Ofsted Inspection Outcome and Structure for Inspection Preparation Financial Systems Detailed Follow-Up 	
Chief Executives	• -	
Communication and Regeneration	• -	
Community and Environmental	Road Maintenance	
Corporate	 Capital Project Management Corporate Compliance Budget Pressures HR and Payroll System Post Implementation Review Energy Consumption and Impact of Green Schemes 	
Governance and Partnerships	Dealing with Member / MP Enquires	
Public Health	Funding	
Resources	Impact of Digital Phone Transition	
Schools	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.

The team has had a number of resourcing challenges due to a combination of long term sick and resignations. This therefore is going to have an impact on full plan delivery so attention is being focused on those areas where an audit is required for this year. For those areas where it would be sensible to defer the audit until the new financial year these will be included on the 2024/25 plan.

Corporate Fraud

The Corporate Fraud and Investigations Team are continuing to examine data matches from the single person discount exercise. Following the completion of all identified 'high risk' matches, progress is being made in examining, and where necessary, contacting those individuals falling within the 'medium risk' and 'low' risk categories. As at the end of the quarter, the total financial outcomes from the exercise is £122,491.55 from a total of 249 identified errors. There have been 2,377 checked where no further action has been necessary. There are still 28,706 matches to be processed which will continue to be reviewed during quarter four.

The team participated in International Fraud Awareness week in November and with the support of the Communications Team posted a number of articles on social media. This has resulted in a small increase in the number of referrals received by the team from members of the public. Whilst many of these referrals relate to benefits the team are able to provide these to the Department of Work and Pensions for review.

The team continue to work jointly with the Department for Work and Pensions on cases which have potential implications for benefits and council tax.

Risk and Resilience

During the quarter 91% of scheduled risk management groups were held.

The key priority for the team is the insurance procurement exercise with the tender currently out to market. Bids for the main lots were received in the quarter and the evaluation took place. Awards will be made in early in quarter four after the standstill period. The more specialist areas of cover for the lower value policies will also be out in quotation early in quarter four.

Support has been provided to ShowTown to start to put in place appropriate insurance arrangements for the charity.

The Corporate Business Continuity Plan and Critical Activities List review is now complete and the final document approved by the Corporate Leadership Team.

Planning is also underway to run a business continuity exercise early in February 2024 related to a cyberattack to test the robustness of arrangements at a strategic level.

Health and Safety

Work continues to implement the accident reporting system in the iTrent system. Whilst the ability to record an accident in iTrent is now working there have been some difficulties extracting data from the system for accident reporting. It is hoped that the system will be fully rolled out by the end of the financial year.

A significant piece of work is being undertaken with Blackpool Transport Services to ensure joint working and the sharing of information of the Tramway including the clear demarcation of roles and responsibilities and collective risk assessment work. The focus at present is ensuring all tram infrastructure risk assessments are up to date. Work has been undertaken to ensure that Work Activity Plans and risk assessments for those who work on the track are up to date.

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. New contracts have been picked up with additional out of borough schools and ShowTown in the guarter.

Performance

Risk Services performance indicators

Performance Indicator (Description of measure)	2023/24 Target	2023/24 Actual
Professional and technical qualification as a percentage of the total.	85%	68%

Internal Audit Team performance indicators

Performance Indicator (Description of measure)	2023/24 Target	2023/24 Actual
Percentage audit plan completed (annual target).	90%	56%
Percentage draft reports issued within deadline.	96%	88%
Percentage audit work within resource budget.	92%	100%

Performance Indicator (Description of measure)	2023/24 Target	2023/24 Actual
Percentage of positive satisfaction surveys.	85%	93%
Percentage compliance with quality standards for audit reviews.	85%	89%

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%	100%
Percentage of risk registers revised and up to date at the end of the quarter.	100%	95%
Number of risk and resilience training and exercise sessions held (annual target).	6	2
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 September	Risk Registers Not Updated
Adult Services	100%	-
Central Support Services	92%	Commissioning and Corporate Delivery
Children's Services	50%	Children's Social Care & Early Help
Communications & Regeneration	100%	-
Community & Environmental Services	100%	-
Public Health	100%	-

The updated information for business continuity plans is as follows:

Directorate	Percentage Updated Within 12 Months
Adult Services	100%
Chief Executive	100%
Children's Services	100%
Communications & Regeneration	100%
Community & Environmental Services	100%

Governance & Partnerships	100%
Public Health	100%
Resources	100%

Health and Safety performance indicators

Performance Indicator (Description of measure)	2023/24 Target	2023/24 Actual
RIDDOR Reportable Accidents for Employees	0	5

There were three new RIDDOR cases relating to employees reported in the quarter summarised as follows:

- Slip, trip, fall at New Langdale
- Lifting & handling at Athena
- Physical assault at Athena

Corporate Fraud Team performance indicators

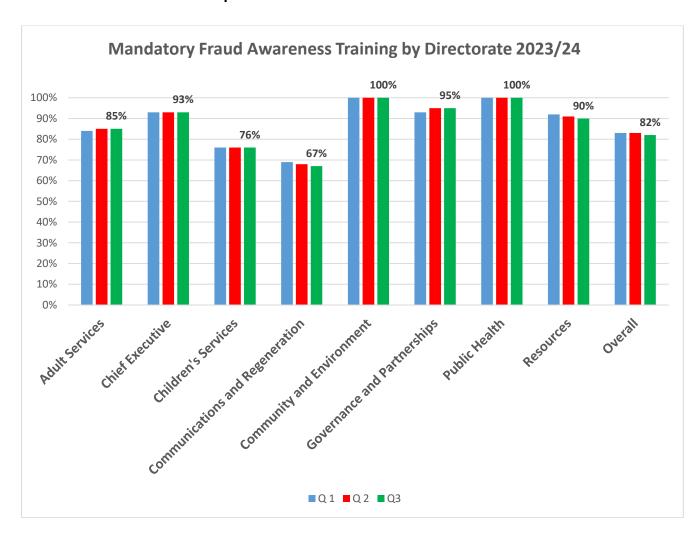
Performance Indicator (Description of measure)	2023/24 Target	2023/24 Actual
% of agreed Council employees completed iPool fraud awareness course.	100%	82%

As at the end of Quarter 3, the overall completion rate was consistent with Quarter 2.

Whilst some minor changes to the levels of completion within individual Directorates are noted, further analysis has revealed that these fluctuations are attributable to Directorate staffing changes which have occurred during the quarter.

As a result, there are no specific issues of non-compliance currently being identified.

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



2. Appendix A: Performance & Summary Tables for Quarter Three Internal Audit reports issued in period

Directorate	Review Title	Assurance Statement	
		Scope	
		The scope of our audit was to review the processes in place to ensure that supporting information for the schemes was sufficiently robust and provides assurance that the requirements of the Community Renewal Fund grant were met.	
		Overall Opinion and Assuran	nce Statement
		Adeq	juate
		We consider that the controls in place are adequate in relation to the information and detail requested by the Council as part of the Community Renewal Fund application process. Our audit testing however identified some inconsistencies in the application of the controls and we have therefore made a number of recommendations to help strengthen the approach for future grant schemes.	
Communication and	Community Renewal	Number of Recommendation	ns Made
Regeneration	Fund	Priority 1	0
		Priority 2	1
		Priority 3	2
		Management Response	
		Steps will be taken to ensure that signed agreements are in place and available for all funded projects, whether internal or external, for any future funding opportunities.	
		For future funding schemes adequate evidence of sampling expenditure will be obtained and checked prior to payment of a grant regardless of whether this expenditure is internal or external.	
		For future grant funded projects steps will be taken to ensure that the project leads provide adequate information around how their projects are making a positive contribution to Corporate Social Responsibilit themes. Whilst this wasn't a requirement under the scheme it was added by the team as good practice.	

Directorate	Review Title	Assurance	Statement
Communication and Regeneration	Bus Lane Camera Charges	 Levying of Charges; 	res al Requirements and GDPR; rement Arrangements; and mages. ree Statement read wate s in place are adequate with ss, several changes are ed minor lapses in s. res Made 0 2 1 for the operation of the Bus ystem will be documented. heme will be collated and nat for management.

Directorate	Review Title	Assurance Statement		
Directorate	Review Title	Assurance Statement Scope The scope of the audit included: Roles and responsibilities for staff; Awareness of relevant legislation; Rotas are in place The budget is appropriately monitored; Satisfaction is appropriately monitored; Procurement guidelines are followed; Appropriate cash handling controls; Partnership arrangements for ticketing; Risk assessments are carried out;		
		Maintenance checks	•	
		Overall Opinion and Assurar		
	Adequate We consider that the controls in place some risk identified and assess, sever necessary. Our testing revealed minor compliance with the controls.		ls in place are adequate with ess, several changes are led minor lapses in	
Communication and	Tourist Information	Number of Recommendation	ns Made	
Regeneration	Centre (TIC)	Priority 1 Priority 2 Priority 3	7 2	
		Management Response		
		The Policy and Procedure Infreviewed annually with revied document. This will also inclandling and refunds.	w dates added to the	
		Relevant staff will be made aware of the business continuity plans existence.		
		The market will be tested on a regular basis to test the price of bespoke goods for resale in the TIC.		
			anagement are currently are completing the Health d Safety Risk Assessments for the TIC.	
	Safe limits will be increased to an appropriate le where the weekly cash takings total does not br insurance limit in place.			
		A stock register will be implemented and a process put i place to perform stock checks. Once a stock register is created damaged and lost stock will be recorded.		

Directorate	Review Title	Assurance	Statement
		Scope	
		The scope of the audit included:	
		 The statutory obligations and whether these are being met; Non statutory activities undertaken; and The effectiveness of the software used by Housing Enforcement Officers. 	
		Overall Opinion and Assurar	nce Statement
		Adec	_l uate
We consider that the controls in place are some risks identified and assessed severa necessary. There needs to be a more consapproach with regards to data entry and a documentation saved outside of the ESBs be stored in a central location. Our testin minor lapses in compliance with the control.		essed several changes are e a more consistent ta entry and all e of the ESB system should n. Our testing revealed	
		Number of Recommendations Made	
		Priority 1	0
Community and	Housing	Priority 2 Priority 3	2
Environmental	Enforcement	Management Response	2
		Version control will be added to policies and procedures as the documents move across to the new template.	
		The Head of Public Protection Enforcement Manager will ke under review on a quarterly	eep the backlog of cases
		The risk of not meeting statutory obligations will be included on the Public Protection risk register.	
Photographic evidence will be stored in or location and not on officers' personal drive easily accessible should an officer not be any length of time. Steps will be taken to ensure that the information entered on ESB is consistent and provides trail of enforcement activities. Discussions are underway with the Procuration Development team to establish if more enforcement software is available.		location and not on officers' easily accessible should an of	personal drives so that it is
		entered on ESB is consistent	and provides a clear audit
		ish if more efficient	

Directorate	Review Title	Assurance Statement	
		Scope The scope of the audit includ Policies and procedu Application and rene Drivers Checks; Taxi vehicle quality; Complaints, complian Management Inform Overall Opinion and Assuran	res; wal; nce and enforcement; and ation.
		We consider that the control with some risk identified and Largely the taxi licensing processet guidelines, our testing realso noted that some statuto currently be met to the requi	s in place are adequate, I several changes necessary. cess is operating within the vealed some anomalies. We bry standards may not
		Number of Recommendation	ns Made
		Priority 1	0
		Priority 2	7
		Priority 3	3
Community and		Management Response	
Environmental	Taxi Licensing	The service will ensure that is with current legislation.	ts charging regime is in line
		Internal procedure notes will where possible procedures waddition, a documented sche considered.	vill be consolidated. In
		A thorough review is being u systems. Quality checking w sample basis however it is lik system will aid quality assura	ill be re-introduced on a ely that any replacement
		A comprehensive review of t procedures and operation ag standards will be undertaken	ainst the DfT statutory
		Taxi licensing responsibilities represented in the risk regist	
		The service want to offer a q options will be reviewed, inc	
		The scope of the team's enfo in relation to DfT standards v	
			a dashboard with some management to effectively

Directorate	Review Title	Assurance Statement	
		<u>Scope</u>	
		Stores stock, includin distribution, rechargi management.	te for the management of any ordering, storage, ing and general
		Overall Opinion and Assuran	nce Statement
		We consider the controls in p several areas of risk identified both the physical and electro processes associated with the authorisation of requests and sales), and the lack of stock to number of lapses in controls	olace are inadequate with d, particularly regarding onic security of stock, the e sale of items (such as the d recording and invoicing of aking. We also found a
		Number of Recommendations Made	
		Priority 1	4
Community and		Priority 2 Priority 3	7
Environmental	Stores	Management Response	2
Services		The permissible use of Stores within the Stores Manual and	
		A physical stock check will tal in the Technology One imple	•
		As a new Stores Assistant has less risk of a lack of staff to conduties. The requirement for the within the sales process will be Stores Manual.	omplete the segregation of the segregation of duties
		The Head of Highways and Tr will have a conversation with Services to arrange suitable a within the depot store files.	the Deputy Head of ICT
		Progress will be made on imp module in the Technology Or	
		A meeting will be organised wofficer about improving the carrangements.	
		Requisition forms will be use and this will be documented	

Directorate	Review Title	Assurance Statement	
		Scope The scope of the audit included:	
		 Progress in relation t 	o the directorate action owing the last staff survey
		Overall Opinion and Assurar	,
		Go	od
		The results of the Staff Survey (2021) show th council has a good organisational culture with responses received to the majority of the que asked. In addition, hybrid working options ap have been well received by staff but alongside benefits do create some challenges such as poissues with recruitment and retention and a pimpact on service accessibility. We acknowled Corporate Leadership are considering some clathe approach taken to hybrid working.	
		Number of Recommendation	ns Made
Components	Organisational	Priority 1	0
Corporate	Culture and Hybrid Working	Priority 2	3
		Priority 3	4
		Management Response Consideration will be given to the introduction of more frequent 'pulse surveys' based on a core set of questions with additional questions added relating to key themes / topics. A guide for hybrid working has been developed and communicated to all Managers. This includes a	
		mandatory 3 days per week of rata for part time employees	on average in the office (pro
		Desk surveys will be reinstate the impact of this on the offi exercise will be undertaken t available meetings rooms an	ce portfolio. In addition, an o assess the number of
A more robust solution is be handling external calls when the office. IT will explore we data from Jabber to measure.		A more robust solution is being implemented for handling external calls whether working at home or in the office. IT will explore whether it's possible to extract data from Jabber to measure how many calls cannot be transferred via Jabber and how many calls are not picked	

Directorate	Review Title	Assurance	Statement
		Scope The scope of the audit included a review of adherence and compliance with the requirements of the 2015	
		Transparency Code. Overall Opinion and Assurar	nce Statement
		We consider that the control with some risk identified and changes necessary. Although adherence to the Transparer of areas where it has not me	s in place are adequate, l assessed with several the Council is largely in acy Code there are a number
		Number of Recommendation	ns Made
		Priority 1	9
		Priority 2 Priority 3	0
		Management Response	
		A review of our current publication requirements (outside of the Transparency Code) will be reviewed against the ICO guidance (last review was 2021).	
	Transparency Code	Links contained within the Council's transparency page will be periodically quality reviewed.	
Corporate		Property Services will ensure related to local authority land housing asset value are public requirements.	
		Accountancy will ensure that related to grants to voluntary enterprise organisations and published in accordance with	y, community and social parking income are
		HR will ensure that transpare Council's organisational char multiples are published in ac requirements.	t, senior salaries and pay
		Highway and Traffic Manage transparency measure relate street parking spaces is publi requirements.	d to controlled on and off-
		Audit and Risk will ensure the related to fraud activity is purequirements.	at the transparency measure blished in accordance with
		The potential to establish go arrangements to ensure min requirements are being met Transparency Code will be di	imum statutory in accordance with the

Directorate	Review Title	Assurance	Statement	
		Scope	<u>Scope</u>	
		The scope of our audit was to controls are in place to minin payments.		
		Overall Opinion and Assuran	nce Statement	
		Adeq	juate	
		We consider that the controls in place are adequate with some risks identified and assessed with several changes necessary. In the main the process for collecting and accounting for cash and card payments is operating effectively, however we have we have highlighted a number of areas where processes and systems could be strengthened. Our testing revealed minor lapses in compliance with the controls.		
	Douments Financial	Number of Recommendations Made		
Corporate	Payments Financial Control Assurance	Priority 1	0	
	Testing	Priority 2	10	
		Priority 3	9	
	Management Response The number of recommendations reflects that a number of random front-line Council services were tested at of the audit with some similar issues being identifications across the board. The audit found weaknesses are record keeping and maintaining a clear audit trail, security arrangements and a general lack of clear processes to follow. In some locations, with the liminumber of staff it was difficult to maintain adequates separation of duty, however our sample testing did identify any anomalies. Each recommendation has been agreed with the reservice management in order to strengthen controlled.		services were tested as part in issues being identified found weaknesses around ing a clear audit trail, general lack of clear locations, with the limited lt to maintain adequate our sample testing did not een agreed with the relevant r to strengthen controls in	

Directorate	Review Title	Assurance Statement		
		 Scope The scope of the audit included: Whether whistleblowing cases received are being actioned appropriately and in line with the Whistleblowing Policy; How awareness of the Whistleblowing Policy is managed; and Whether there is any further good practice which could be introduced. 		
		Overall Opinion and Assurar		
		We consider that the controls in place are adequate, with the policy being detailed in comparison to other authorities, as well as incorporating many of the best practice elements from the BIS Code of Practice. We have identified some risks and improvements from our comparison with the BIS Code of Practice and other local authority whistleblowing policies.		
			Number of Recommendations Made	
		Priority 1	0	
	NAMES AND A DESCRIPTION OF THE PROPERTY OF THE	Priority 2 Priority 3	2	
Corporate	Whistleblowing Compliance	Management Response		
		The Whistleblowing Policy will be reviewed annually by the Standards Committee. Biannual training will be provided to whistleblowing contacts.		
		Although the policy can be for Council website, it is not read made more prominent on the	dily accessible. It will be	
		Reference will be made to th Policy in corporate contracts		
		It has been 5 years since the awareness of the Whistleblo consideration will be given to awareness of the Whistleblo	wing Policy, therefore promoting and raising	
		The Workforce Development although it is technically poss whistleblowing policy in the mandatory element, the add other key policies would make and deter from the courses of further action will be taken har raising of policies (all of whice Intranet) will help to ensure a existence.	sible to include the Council induction as a ition of this step for this and ke the iPool course unwieldly core purpose. Therefore no nowever regular awareness h are available on the Staff	

Directorate	Review Title	Assurance Statement	
		Scope	
		The scope of the audit include	led:
		all necessary contract and maintained; Compliance with corrections, including performance metrics. Monitoring and report place to track contrate. Risk management primanagement; Procedures for contractions, ensure	pricing, delivery schedules, s, and quality standards; orting mechanisms are in
		Overall Opinion and Assurar	nce Statement
			quate
Corporate	Contract Management	We consider that the controls in place are inaded with a number of material risks identified, and sign improvement required. Within our sample of 26 contracts from a possible 800 contracts currently place, we found areas of good practice, however review showed that contract management practice across the Council requires strengthening.	
		Number of Recommendatio	ns Made
		Priority 1	1
		Priority 2	1
		Priority 3	1
		Management Response	
		Contract management practi ensure contracts effectively and value for money is being discussed with the Corporate	achieved and this will be
		The existing iPool contract management course is fundamentally fit for purpose in a majority of cases but not for high risk contracts. The existing iPool course will undergo a refresh to ensure that it remains current. Management will consider re-introducing training for management of higher risk contracts. This will include a review of the governance arrangements in place. Research will be undertaken on the availability of external training providers.	
		The Purchasing and Buying – Procurement will be updated proposed in the Procuremen	d in line with the reforms

Directorate	Review Title	Assurance Statement		
		Scope The scope of the audit included: Inspections are carried out; Documentation of inspections is retained; Risks are addressed; Management oversight of inspections; Robust contracts are in place. Overall Opinion and Assurance Statement		
		-	_	
		Inadequate We consider that the controls in place are inact Our sample testing showed that all statutory of been met and Property Services have arranged contractors to do this work. However, our main was related to the lack of a clear audit trail fol inspections and maintenance of remedial action paperwork. In addition, we found that Propert does not have sufficient oversight of the inspection of the wholly owner companies and academies.		
		Number of Recommendations Made		
Resources	Statutory Property	Priority 1 Priority 2	1 8	
	Inspections	Priority 3	0	
		Management Response The remedial tab in the Asset be used going forward.	t Management system will	
		CIPFA have been appointed three housing companies in 2 owned companies will be app	2023. The other wholly	
		The Head of Property Services will discuss with the wholly owned companies' the use of the asset management system.		
		Assurance arrangements with academies will be discussed at the Schools Head Teacher Forum.		
		Gaps in PAT testing which arose as a result of the pandemic will be addressed and such issues will be recorded in the asset management system.		
		A timetable has been put in place to tackle the backlog of gas inspections.		
		Steps will be taken to ensure that contracts are retendered at the appropriate time.		
		Meetings with contractors will be minuted where the contract is high in value.		

Directorate	Review Title	Assurance Statement	
		Scope The audit testing which was carried out included: Governance; Risk Management; Financial Planning & Budgetary Control; Payroll / HR Management; Expenditure; Income; Unofficial Funds; Security Of Assets; Core Assurance Testing.	
			<u>-</u>
		We consider that the control some risks identified and assonecessary. Our testing reveal compliance with the controls	s in place are adequate with essed and several changes ed minor lapses in
		Number of Recommendations Made	
		Priority 1	0
Schools	Highfurlong School	Priority 2 Priority 3	3 2
		Management Response	
		Review dates are to be added Delegation and the Delegation the policies will be scheduled recorded at the appropriate of	on Planner and reviews of I. The minutes will be
		The Delegation Planner will be figures quoted in the Scheme	
		When reviewing the reconcil School Fund it was found tha did not contain a completion have noted this error.	t one of the reconciliations
		There are occasions when the fund to purchase main budge staff member buys items out kept to a minimum. The scho procedures via the finance sy have been encouraged to avoid	et items, for example if a of their own money. This is ool follows financial estem to procure items. Staff
		The Financial Procedures Ma include the procedures arour	

Directorate	Review Title	Assurance Statement									
		Scope The audit testing which was carried out included: Governance; Risk Management; Financial Planning & Budgetary Control; Payroll / HR Management; Expenditure; Income; Unofficial Funds; Security Of Assets; Core Assurance Testing.									
		Adec	_l uate								
		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.									
		Number of Recommendations Made									
		Priority 1	0								
		Priority 2	2								
Schools	St Johns Church of England Primary	Priority 3	5								
555513	School	Management Response The annual review of the Financial Procedures is included in the Governor's Policy Review schedule. A review date has been added to the Delegation Planner. The Financial Procedures have now been approved by governors. The Working Practice document that explains the role of									
		a Governing Body and Governors was last reviewed in 2018 and Governor Services have been tasked to review this. There were three Governors in the register of interest's									
		There were three Governors in the register of interest's document who have not confirmed their business interests and Governor Services have been tasked with addressing this.									
		The Governing Board have been made aware of the requirement for an action plan to be developed after the completion of benchmarking.									
		Action has been taken to ensure that the school now have the signed month 12 reconciliation which was dor virtually at the time.									
		A decision has been taken that the 2023 INEOS funding is to be retained in the unofficial fund account rather than transferring this to the main account.									

Directorate	Review Title	Assurance Statement							
Schools	Woodlands Special School	Scope The audit testing which was Governance; Risk Management; Financial Planning & Payroll / HR Manage Expenditure; Income; Income; Unofficial Funds; Security Of Assets; Core Assurance Test Overall Opinion and Assurar Adec We consider that the controlsome risks identified and assurate compliance with th	Budgetary Control; ment; ing. nce Statement quate Is in place are adequate with essed and several changes led minor lapses in s. ns Made O O 4 chases for the school whilst e is above £10, they will text e is above £10, they will text e is above £10, they will text ends will provide charts on the ancial year. Icises will be discussed at the in the future. Sovernor Hub two weeks licies that are approved will						

Directorate	Review Title	Assurance Statement								
		Scope The audit testing which was carried out included: Governance; Risk Management; Financial Planning & Budgetary Control; Payroll / HR Management; Expenditure; Income; Unofficial Funds; Security Of Assets; Core Assurance Testing. Overall Opinion and Assurance Statement								
		Adequate We consider that the controls in place are adequate with								
	Our Lady of	some risks identified and assessed and several changes necessary. Our testing revealed minor lapses in compliance with the controls.								
Schools	Assumption RC Primary School	Number of Recommendations Made								
	, , , , , ,	Priority 1	0							
		Priority 2	3							
		Priority 3	3							
		Management Response The annual register of interest declarations are held on Governor Hub and this information will be transferred to the school website.								
		The Financial Procedures Manual will be completed and approved by the Governors.								
		The unofficial school fund record is being transferred from a manual booklet to an electronic spreadsheet. An additional column will be added to include the date and signature. Once a month the Senior Administrator will reconcile the entries and include this information.								
		A review of all physical personnel files is taking place to ensure they are accurate and up to date with the electronic versions.								

Progress with Priority 1 audit recommendations

A number of priority one recommendations were implemented in the quarter:

- Driving at Work x 3
- Heritage Service Transition x 1
- Commissioning x 1
- Children's Services Financial Systems x 1
- Highways Enforcement x 1

A number of priority one recommendations which were due in the quarter have had their deadline extended including:

- CCTV x 1 revised deadline July 2024
- Track Maintenance Programme x 1 revised deadline March 2024
- Wholly Owned Companies Governance Arrangements x 1 revised deadline March 2024
- Children's Services Financial Systems x 4 revised deadline May 2024
- Layton Depot Stores x 4 revised deadline June 2024
- Children's Services Medium Term Financial Strategy x 1 revised deadline April 2024

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

- Statutory Property Compliance x 1
- Payroll x 1
- Contract Management 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 October 2023 and December 2023, the Council authorised no RIPAs.

Following a desk based inspection the Council was selected for an on-site inspection on the 9th November 2023 by the Investigatory Powers Commissioner's Office. The outcome of the inspection concluded that the Council is in a strong position in respect of trained officers should the need to exercise the powers arise in the future. Applicants and Authorised Officers have amassed a wealth of experience using an internal authorisation procedure which could be transferred to the full RIPA process requiring a magistrate's approval if required.

Some minor changes to the Policy (which was previously approved by Audit Committee) were proposed which have been actioned by the Director of Governance and Partnership as the Senior Responsible Officer for RIPA.

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

			Referrals Received			Case Closures									Action	Taken	on Clo	sed C	ases		
CORPORATE FRAUD AND ERROR STATISTICS 2023/2024	Number of Cases Brought Forward from 2022/2023	Internal	External	I	Total Number of Referrals Received	Fraud Proven		Error Proven			No Fraud / Error Identified			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	F						
TYPE OF FRAUD									Α	NNUA	L SUM	MARY	2023	/ 2024							
Council Tax – Single Person Discount	7	25	11	-	36	-	-	-	14	5	-	9	5	-	£8,354.38	33	-	-	1	-	10
Council Tax Reduction (CTRS)	15	18	7	534	559	-	-	-	7	-	1	15	6	125	£8,329.55	154	-	-	-	-	420
Housing Benefit Claims	-	-	-	49	49	-	-	-	-	-	-	-	-	22	-	22	-	-	-	-	27
Housing Tenants	-	-	-	97	97	-	-	-	-	-	-	-	-	64	-	64	-	-	-	-	33
Payroll	5	10	-	157	167	6	-	-	-	-	-	1	-	17	-	18	-	6	-	-	148
Business Rates	4	-	-	-	-	-	-	-	-	-	-	2	2	-	-	4	-	-	-	-	0
Procurement	-	-	-	5,296	5,296	-	-	-	-	-	-	-	-	20	-	20	-	-	-	-	5,276
Fraudulent Insurance Claims	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Social Care	-	2	-	-	2	1	-	-	-	-	-	-	-	-	£5,289.60	-	-	-	-	1	1
Abuse of Position – Financial Gain	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Abuse of Position – Data	2	-	-	-	-	1	1	-	-	-	-	-	-	-	-	1	-	1	-	-	0
General Financial Fraud	12	1	4	-	5	-	-	-	-	-	-	3	5	-	-	8	-	-	-	-	9
Blue Badge/Travel Concession/Resident Parking	2	-	1	1,227	1,228	-	-	-	-	-	334	-	1	891	£123,200.00	1,226	-	1	-	-	4
Housing / Right to Buy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Premium Council Tax Exercise (SPD/CTRS)	-	-	-	31,083	31,083	-	-	-	1	-	249	-	-	2,128	£122,491.55	2,377	-	1	-	-	28,706
TOTALS	49	57	23	38,443	38,523	8	1	0	21	5	584	30	19	3,267	£267,665.08	3,927	0	7	-	1	34,637

4. Appendix C – Insurance Claim Payments by Financial Year

