Audit and Risk Services Quarter Four Report 1st January to 31st March 2022

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1. Quarter Four Summary

Service Developments

1.1 Internal Audit

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

Directorate	Internal Audits
Children's Services	Financial Systems DevelopmentEarly Years Payment System
Chief Executives	Commissioning
Communication and Regeneration	Conference CentreLibrary ManagementGrowth and Prosperity
Corporate	Business Loans FundImpact of Spending Cuts
Governance and Partnerships	Children's Legal Services
Public Health	Health Protection Arrangements
Schools	Layton Primary School

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.

1.2 Corporate Fraud

The Senior Counter Fraud Advisor is leading on the post assurance work which is a requirement of Central Government, in relation to the various grants paid to local businesses who were impacted by the pandemic and which apparently qualified for the various schemes in place. During the quarter the key focus of the team was undertaking pre-assurance testing on the Omicron business grants which were payable.

Proactive fraud prevention work is underway with a focus on the National Fraud Initiative. Work is progressing to launch more proactive communication around fraud awareness to act as a deterrent message and improve the quality of fraud referrals received.

1.3 Risk and Resilience

The team have successfully completed the majority of insurance renewals for the new financial year. There are still some unresolved issues with property insurance, given an increasingly hard market, which the team are continuing to focus on.

Overall 100% of the scheduled risk management groups were held in the quarter. Risk workshops were facilitated for the climate change initiative and heritage trams. Work is also underway with the wholly owned companies in order to review their strategic risk registers to enable effective reporting to the Shareholder Committee.

The work to review service level business continuity plans and transfer these onto the new template which combines business impact analysis and business continuity arrangements is ongoing. Once all service level business continuity plans have been reviewed the Corporate Business Continuity Plan will be updated.

1.4 Health and Safety

The team continue to have a key role in providing advice, support and guidance to all Council services with regards to safe working practices during the Covid-19 pandemic with a view to ensuring appropriate arrangements are in place for the return to the office.

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The health and safety management audit programme is underway and audits completed in the quarter include property services, central library and highways. The modernisation of the health and safety management system on the Hub is ongoing as is the transfer of accident reporting onto the new HR system which is due to go live in July 2022.

The team continue to have success in winning external contracts for the provision of a health and safety service. They provide ongoing support to a number of schools (in and out of borough), Blackpool Waste Services, Blackpool Operating Company and Fylde Borough Council. They are also providing interim support to Blackpool Coastal Housing. Due to the success of the team gaining external work a recruitment exercise is underway to appoint a new Trainee Health and Safety Advisor.

Performance

Risk Services performance indicators

Performance Indicator (Description of measure)	2021/22 Target	2021/22 Actual
Professional and technical qualification as a percentage of the total.	85%	65%

Internal Audit Team performance indicators

Performance Indicator (Description of measure)	2021/22 Target	2021/22 Actual
Percentage audit plan completed (annual target).	90%	99%
Percentage draft reports issued within deadline.	96%	89%
Percentage audit work within resource budget.	92%	100%
Percentage of positive satisfaction surveys.	85%	93%
Percentage compliance with quality standards for audit reviews.	85%	92%

Risk and Resilience Team performance indicators

Performance Indicator (Description of measure)	2021/22 Target	2021/22 Actual
Percentage of Council service business continuity plans up to date.	100%	71%
Percentage of risk registers revised and up to date at the end of the quarter.	100%	89%
Number of risk and resilience training and exercise sessions held (annual target).	6	3

Performance Indicator (Description of measure)	2021/22 Target	2021/22 Actual
Number of trained Emergency Response Group Volunteers. (For monitoring purposes only – responsibility lies with Adult Social Care). We don't hold details of the ERG volunteers across the Lancashire footprint but it is going to requested that numbers are shared at the next pan-Lancashire meeting.	50	27
Percentage of property risk audit programme completed (annual target).	100%	100%

The following table details the current position in relation to business continuity plans:

Directorate	%	Business Continuity Plans Not Updated
	updated	
Adult Services	92%	Adult Social Care
Chief Executive	100%	
Children's Services	0%	167 Hornby Road
		Adoption
		Blackpool Young People's Service
		Business Support & Resources
		Duty, MASH, Awaken
		EDT
		Families In Need
		Family Time/Together Workers
		Fostering
		Grange Park
		School Standards & Effectiveness
		SEND
		SQR
		Supporting and Strengthening Families
		Supporting Our Children
		TAB
		The Link
Communications & Regeneration	93%	Business Support
Community & Environmental Services	87%	Coastal and Environmental Partnerships
		Community Safety
Governance & Partnerships	100%	
Public Health	100%	
Resources	100%	

The following table details the current position in relation to risk registers:

Risk Management Group	%	Risk Registers Not Updated
	updated	
Adult Services	100%	

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Central Support Services	86%	Executive's Management Support
		Housing Strategy
Children's Services	100%	
Communications & Regeneration	100%	
Community & Environmental Services	67%	Highways
		Highways (Engineering)
		Public Protection
Public Health	100%	

Health and Safety performance indicators

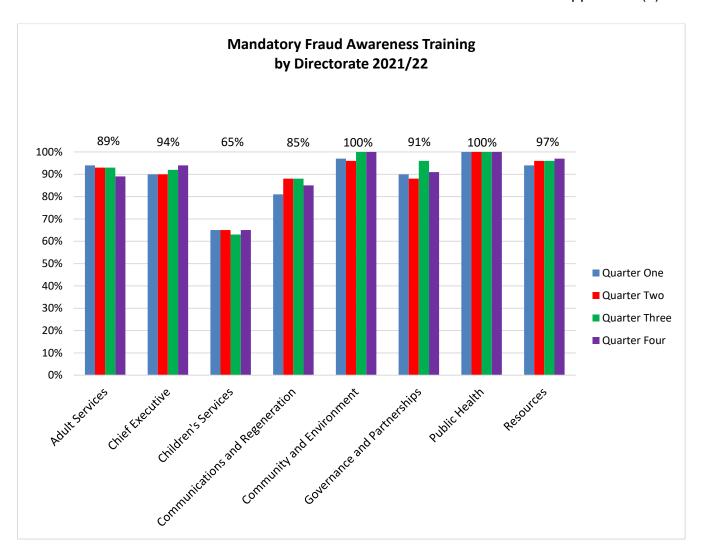
Performance Indicator (Description of measure)	2021/22 Target	2021/22 Actual
RIDDOR Reportable Accidents for Employees	0	2
Training Delivered to quarterly plan	100%	100%

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

Corporate Fraud Team performance indicators

Performance Indicator (Description of measure)	2021/22 Target	2021/22 Actual
% of agreed Council employees completed i-Pool fraud awareness course.	100%	89%

As at the end of quarter four, the overall completion rate has decreased from 90% to 89%. Whilst there have been some minor changes to the levels of completion within individual Directorates, further analysis has revealed that such fluctuations can be attributed to Directorate staffing changes which have occurred during the quarter.



Appendix 4(a)

	Forward	Received	Case Cl	osures	n / Error	Action	Taker	n on Cl	osed (Cases	y Under
CORPORATE FRAUD STATISTICS - 2021/2022	Number of Cases Brought Forward from 2020/21	Total Number of Referrals Received	Fraud/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
Type of Fraud				Al	NNUAL SUMMARY	2021-22					
Council Tax - Single Person Discount	6	73	21	32	£6,580.13	53	0	0	0	0	26
Council Tax Reduction (CTR)	2	17	0	10	-	10	0	0	0	0	9
Business Rates	4	0	0	0	-	0	0	0	0	0	4
Procurement	0	0	0	0	-	0	0	0	0	0	0
Fraudulent Insurance Claims	2	0	0	0	-	0	0	0	0	0	2
Social Care	1	2	0	1	-	1	0	0	0	0	2
Economic & Third Sector Support	0	0	0	0	-	0	0	0	0	0	0
Gross Misconduct (Disciplinary Code)	3	0	2	0	£25,582.22	0	0	2	0	0	1
Pension	0	0	0	0	-	0	0	0	0	0	0
Investment	0	0	0	0	-	0	0	0	0	0	0
Payroll & Employee Contract Fulfilment	0	1	0	0	-	0	0	0	0	0	1
Expenses	0	0	0	0	-	0	0	0	0	0	0
Abuse of Position - Financial Gain	1	1	0	2	-	2	0	0	0	0	0
Abuse of Position - Manipulation of Financial or Non-Financial Data	1	0	0	1	-	1	0	0	0	0	0
General Financial Fraud	6	15	0	4	-	4	0	0	0	0	17
Disabled parking concessions	0	4	0	1	-	1	0	0	0	0	3
NFI 2018	40	0	0	40	0	40	0	0	0	0	0
NFI Single Person Discount Proactive Exercise	83	2,026	1	13	862.35	14	0	0	0	0	2,095
NFI 2021/22	0	6,943	622	2,864	136,177.35	3,486	0	0	0	0	3,457
Totals:	149	9,082	646	2,968	£169,202.05	3,612	0	2	0	0	5,617

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

Internal Audit reports issued in period

Sco Con	ope mpliance testing was unde	
Con	mpliance testing was unde	
		rtaken as follows:
Adult Services Keats and New Langdale Day Centres Nur Pri Pri Pri Pri Pri Pri Pri Pri Pri Pr	 Health and Safety Ma Staffing arrangement Staff training plans. DBS checks. Purchasing cards and Quality assurance arr Security measures. Service user's monies Procedures in place for a line of the second of	ons. on of Care Plans. ering of medication. vid Secure Arrangements. inuals & Risk Assessments. s. petty cash. angements. or external activities. control procedures. ce Statement surance controls in place are concerned that in a small able to confirm whether care rone service user no care chis have assessed this equate. as Made 1 6 4 thas been reviewed and the edicine training course in een delivered and standard chase cards circulated. ure that care plans are in that these are fully information. indertake housekeeping on

Directorate	Review Title	Assurance	Statement
Directorate	Neview Title	Scope The scope of this review was to: The roles and responsibilities and breadth and depth of knowledge of the Council's decisions making procedures. Review a sample of decisions made within the Children's Services directorate in order to establish whether the Council's decision making procedures are being followed correct Overall Opinion and Assurance Statement Adequate We consider that the controls in place are adequate we some risk identified and several changes necessary. In main our review highlights the need for managers to be more aware of the requirements, which can be gained.	
Children's Services	Executive Decisions	through the available training some strengthening of govern Number of Recommendation Priority 1 Priority 2 Priority 3	g. We have also suggested nance arrangements.
		Management Response The iPool training course will Senior Officers and included a process for new staff.	· · · · · · · · · · · · · · · · · · ·
		Formally documented arrang discussions regarding decision Director of Children's Service.	n making between the
		A formal approach to recording actions will be established for meetings, and ensure a consideross the directorate, with indecision making and forward agenda items.	r the Head of Service stent approach is in place nclusion of executive
		Consideration will be given to requirements for the director accordingly.	-
		Operational decision making documented and senior office requirements.	•
		A strategy review planner will be produced and monitored.	

Directorate	Review Title	Assurance Statement	
		through two peer rev Local Government As How the appointmen Officers and procurer marketing by individu Corporate Communic	nt improvements suggested views carried out by the sociation (LGA); at of Communications ment of external support for ual services impacts the cations Team; andemic has impacted services communications.
		Adeq	
		We consider that the controls in place are adequate with some risks identified and assessed and several changes necessary. Many improvements have been made to communications since the LGA peer reviews. Number of Recommendations Made	
		Priority 1	0
	Communications	Priority 2 Priority 3	<u>6</u> 4
Communication and Regeneration		Management Response Annual corporate communicate reintroduced as will quarterly campaign evaluation reports.	communications and
		The recommendation that all decisions should be passed the Communications team will be decision. This will also include continuity arrangements.	nrough the Corporate e passed to CLT for a
		The Corporate Procurement help identify where other Coron external resource.	
		A Service Level Agreement with the core service offer for Cou	•
		Consideration will be given as that a co-ordinated approach established between the Corp team and other communicati	to sharing information is porate Communications
		The Corporate Communication of sub-domains when decision passed through the team. An will be carried out and a governmentain and update these were substituted in the communication and update these were substituted in the communication and update the communication and update the communication and update and update the communication and update and upd	ns for new websites are audit of existing websites ernance structure to

Directorate	Review Title	Assurance Statement	
		Scope The scope of the audit was to meeting Ofsted requirements	
		outcomes, quality assurance Overall Opinion and Assuran	
		We consider that the control some risk identified and asse necessary. The service has made backlogs are filled and the quartrack however further work is	s in place are adequate with ssed with several changes ade some progress to ensure rality cycle is put back on
		Number of Recommendation	ns Made
		Priority 1	0 5
		Priority 2 Priority 3	4
		Management Response	
		The Head of Adult Learning w documents are completed an possible.	
Communication and	Adult Learning	Regular Management Team r progress relating to quality o walks are reported and moni	bservations and learning
Regeneration		A recovery plan will be put in are brought up to date.	place to ensure file audits
		The service will ensure that to produce an ACFL Business	•
		The service will implement a that learning plans are cross classrooms to ensure the Quanecessary access preventing from being missed.	referenced to all virtual ality Manager has all
		Attendance rates will be repo ensure single day courses do	
		The service will ensure the w proposed timeframe and follows:	
		Further discussions will take current arrangements to ensi wellbeing support within class can be better evidenced.	ure mental health and
		Further consideration will be vision, further integrations be practice sharing can be under the service's post pandemic r	etween services and best rtaken to further enhance

Directorate	Review Title	Assurance	Statement
		submitted to the Dep assess whether suffic collated to substantia • Follow up the recent the self-assessment t	response to the self- naire, which has been partment for Transport, and ient evidence has been ate the scores indicated. independent review of o determine the ne action plan to address the
		Overall Opinion and Assuran	ce Statement
		Adeq	uate
		We consider that the controls in place are adequate, however we note that that the availability of evidence to support criteria for some of the bandings is several years old. We understand that there are some planned update due to take place to the Road Asset Maintenance Strategy during 2021-22 that will address some of the oudated processes and documents.	
		Number of Recommendation	ns Made
Community and	Highways	Priority 1	0
Environmental	Maintenance Grant	Priority 2	<u>3</u>
		Priority 3	1
		Management Response Minutes of meetings will be t and agreed actions for the Highways Consultative Forum Meetings.	ghways Investment Group,
		The evidence available on Ga the most current version of d	·
		A performance management and implemented to support	-
		An information strategy will be with other local highways aut	
		Discussions are taking place v modelling and associated cos	
		Enquiries are ongoing to establish suitable training for local authorities' highways officers.	
		Team meetings will be re-esta	ablished and formalised.
	Discussions will take place with the Winter Mainto Operational Supervisor (Enveco) to ensure annual and sign off of the plan.		

Directorate	Review Title	Assurance Statement	
		Scope The scope of the audit was to enforcement activities across Environmental Services direct legislation, and whether imprensure a more consistent appropriate various teams.	the Community and torate, including relevant rovements can be made to
		Overall Opinion and Assuran	ce Statement
		Inadequate We consider that the controls in place are inadequate with a number of material risks identified, significant improvement required. Highways Inspectors have not been provided with adequate training in enforcement action and the systems in place are not as robust as they could be. We are therefore unable to provide assurance that controls within Highways are being managed effectively.	
		Number of Recommendation	ns Made
		Priority 1	2
		Priority 2	3
Community		Priority 3	3
and Environmental	Enforcement Activity	Management Response A cross service working group discuss enforcement issues.	
		Steps will be taken to locate a can house caravans and traile been granted.	-
		Steps will be taken to help un be seized as a result of enforce ensure that secure and safe lo declared to insurers.	cement activity and to
		The Council website will be updated to include more information for residents such as to whom untaxed vehicles should be reported.	
		Discussions will take place with Legal Services are use of sanctions by Highways Inspectors.	
		Discussions will take place as to the feasibility of Enveco having access to the Council's ESB system and vice-versa.	
		Training on enforcement activities Highways Inspectors.	on will be provided for
	Enforcement procedures will be reviewed and under they cover all aspects of the enforcement are dated and include version control.		of the enforcement process,

Directorate	Review Title	Assurance	Statement
		result of Covid-19; The recovery plans in and how realistic there The impact on leisure	place for the leisure centres y are; e centre staffing levels, whether this is likely to be
		Overall Opinion and Assuran	ce Statement
		The onset of the Covid-19 par a significant impact on the pe Council run leisure centres. The number of areas of improvem required recovery. We theref current approach is adequate and assessed and several cha	ndemic has undoubtedly had erformance of the three he service have identified a nent which will assist in the ore consider that the with some risks identified
		Number of Recommendations Made	
Community	Management of	Priority 1 Priority 2 Priority 3	0 7 0
and Environmental	Leisure Centres	Management Response	
		The Leisure Facilities Manage contingency plans and will moon a monthly basis.	
		The business development place expanded including a longer to projects. Each project will incomeaningful and realistic miles officers. The anticipated finance each project will also be identicated.	erm view of developing lude more actions with stones, and responsible ncial benefits relating to
		A review of the risk register we that all potential scenarios whare captured and detailed.	
		A consistent format for the redata will be agreed and adopt level of detail provided to quapresented. The Leisure Facility Managers with a greathe performance data provided	ted, and an appropriate antify the data being ies Manager will present the ter level of challenge over
		Consideration will be given to Facility Managers between the strategic capacity.	-

Directorate	Review Title	Assurance Statement	
		Scope	
		We reviewed the Blackpool Climate Emergency Action Plan, and whether the structure, project management arrangements and resources in place will enable delivery.	
		Overall Opinion and Assurance Statement	
		Adec	quate
		We consider that the controls in place are adequate. In particular, our review found that a detailed Climate Action Plan had been developed and project management, structure and monitoring arrangements	
		established. It is early in the the Climate Action Plan and	recommendations have been
		made to build upon the cons	iderable progress made.
		Number of Recommendatio	ns Made
		Priority 1	0
		Priority 2 Priority 3	11 4
		Management Response	4
Corporate	Climate Change	The identification and preparation of climate change funding bids will take place. Bids for funding will compensate for there being no climate action fund in	
33. po. u.o	eac ea.,ge	place, and will be used to maximise funding. Financial models for potential climate change investments and a carbon costing will be considered.	
		Initial climate change 'shove identified and considered for	
		A full climate change commu will be developed.	unications and marketing plan
		A staff group has been estab time in April.	lished and met for the first
		A Carbon Literacy training ro prepared, and plans for IPoo considered. Training for Hea Managers has commenced.	I modules are being
		An external evaluation of pro	
		Climate Action Plan performance indicators will be finalised and performance targets will be established.	
		The work with the Carbon Tr forward route map identified	
		Steps will be taken to record particularly around fleet and	

Directorate	Review Title	Assurance	Statement
Directorate	Review Title Carbon Emissions	Scope The purpose of this audit was data collected including the r systems used, to ensure they and accurate information. Overall Opinion and Assurant Inade We consider that the control with a number of material ris improvement required. Data place and a more consistent Council and wholly owned cotarget net zero carbon by 203 Number of Recommendation Priority 1 Priority 2 Priority 3 Management Response	s to review and verify the reliability of data collection provide timely, complete rece Statement quate s in place are inadequate sks identified and significant a systems need to be put in approach taken across the empanies if it is to meet its 30. Ins Made 1 1 0
		Steps will be taken to record particularly around fleet and to have an overall view.	•
		For the 2019/20 reporting year data collection has ceas and the footprint is being calculated based on the data available given the gaps identified. A way forward will be agreed in relation to the collection of future year emissions and consumption data via the Climate Change Group.	

Directorate	Review Title	Assurance	Statement
Governance	Information	Scope The scope of our audit was to review the progress made against the actions undertaken to address the recommendations made following the recent ICO Audit.	
		Overall Opinion and Assuran	_
		Our assessment of the progre action to address the ICO rec all actions have been comple one which is in progress. We controls in place are good.	ess made against the agreed ommendations found that ted, with the exception of
and Partnerships	Commissioners Audit Follow-Up	Number of Recommendation	ns Made
	·	Priority 1	0
		Priority 2	0
		Priority 3	1
		Management Response The audit found that just one of the ICO recommendations was outstanding at the time of review which was the Information and ICT Security Acceptable Use Policy. A draft revised policy was in place and since the issue of the audit report this has now been agreed and finalised on the 31st March 2022.	
		Scope The scope was to ensure that place to minimise financial risbenefits. Overall Opinion and Assuran	sk related to housing
		Go	_
	Housing Benefit	Overall, we have assessed the controls over the housing being revealed minor lapses in in controls.	at there is a good system of nefits system. Our testing
Resources	Financial Control	Number of Recommendation	ns Made
	Assurance Testing	Priority 1	0
		Priority 2 Priority 3	3
		Management Response	<u> </u>
		Version control will be added procedures to evidence when	·
		It will be ensured that application correct files for claimants. Pathere is not an application for documentation on the claimaters.	ation forms are stored in the yments will not be made if rm and associated claim

Directorate	Review Title	Assurance	Statement
		for controlling access	ral security arrangements
		Overall Opinion and Assuran	ce Statement
		Split As	surance
		We consider that controls rel and environmental monitorir centres are adequate. Data be arrangements are also appro	ng of the Council's data packup and disaster recovery
Resources	Cyber Security (Data Infrastructure)	We do however consider that some controls relating to the servicing and maintenance of the power and cooling	
		Number of Recommendation	ns Made
		Priority 1	2
		Priority 2 Priority 3	6
		Management Response	Ŭ
		The condition of the external Buildings will be confirmed.	cooler units at Municipal
		The responsibility for arrangi system at Municipal Building:	-
		Action is being taken to reint Services should there be a ut	
		Testing of the power loads w centre will be conducted.	ithin Bickerstaffe House data
		The recommissioning and rei metering at Bickerstaffe House agenda for the next Energy N	se will be placed on the lanagement Group.
		TNP will be commissioned to BMS network.	carry out all addit of the

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 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 Priority 3	1 4
Schools	St Teresa's Primary School	Management Response	
		An up-to-date register of interest was requested from Governor Services and this has been uploaded onto the website. Individual details for each governor on the 'Governors' page of the school website have been checked for accuracy to ensure that they match the register.	
		The school finance policy is reviewed annually. The next review is Summer Term 2022 and the purchasing cards section will be amended to cover the scope for use of purchasing cards and this will be agreed by the governing body.	
		To enable VAT to be reclaimed where applicable and to ensure that all reclaimed VAT is supported by a valid receipt when shopping in a supermarket, the school will ensure that VAT receipts are requested from customer services where possible.	
		The scope of use for the School Fund account and its procedures will be added to the Finance Policy and agreed by the governing body at its next review in the Summer Term 2022.	
		The independent auditor for the School Fund will be asked to provide an audit report at the end of this academic year.	

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	
		Split Assurance	
		We consider that the controls in place are adequate with some risks identified and assessed and several changes necessary. We do however consider that the sharing of the purchase card creates unnecessary risk and have therefore assessed this element of the scope as inadequate. Our testing revealed minor lapses in compliance with the controls.	
		Number of Recommendations Made	
Schools	Boundary Primary School	Priority 1 Priority 2 Priority 3	1 2 4
		Management Response	·
		To ensure that the purchase card is kept secure and used appropriately the card is now only be used by the School Business Manager. In addition, the procedures have been amended so that individual receipts are uploaded to support each separate transaction. Going forward, all VAT will be claimed for in full and using the correct codes.	
		The Unofficial School Fund currently remains unused. The pandemic halted activities, such as fundraising, which is what this account was used for. The account will be used again this summer and the records will then be audited by an external body.	
		The school have requested that Governor Services annually provide the school with the latest version of the register of business interests for publishing on the school's website each year.	
		Governors have been reminded of their responsibility to record any completed training via GovernorHub.	
		The school's finance policy and procedure document was updated in November 2021 and the matrix identifies that the scheme of delegation will be reviewed annually.	

Directorate	Review Title	Assurance Statement	
	St Bernadette's Primary School	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 some risks identified and assessed and several changes necessary. Our testing revealed minor lapses in compliance with the controls.	
		Number of Recommendations Made	
Schools		Priority 1	0
		Priority 2 Priority 3	<u>3</u> 5
		Management Response	
		The school will create an action plan following each financial benchmarking exercise.	
		Where possible, the school will obtain VAT receipts for purchase card transactions and upload these in a timely manner. Steps will be taken to ensure that VAT transactions are processed correctly to enable it to be reclaimed where appropriate.	
		To allow the school budget and the school fund account to be kept separate, the school will explore other options, such as considering the use of alternative suppliers, when transactions need to be made from the school fund account.	
		Governors have agreed a more detailed scope for the school fund. This will be written in the Financial Procedures. In addition, The School Fund will be a permanent agenda item for the Resource Committee.	

Progress with Priority 1 audit recommendations

Two priority one recommendations were implemented in the quarter including:

- Day Services
- Care at Home (Internal Provision)

Appendix 4(a)

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 and include:

- Community Engagement x 1
- Water Self-Supply x 1
- Managing the Leavers Process x 1
- CCTV x 1
- Animal Health Outbreak Management x 2
- Track Maintenance Programme x 1

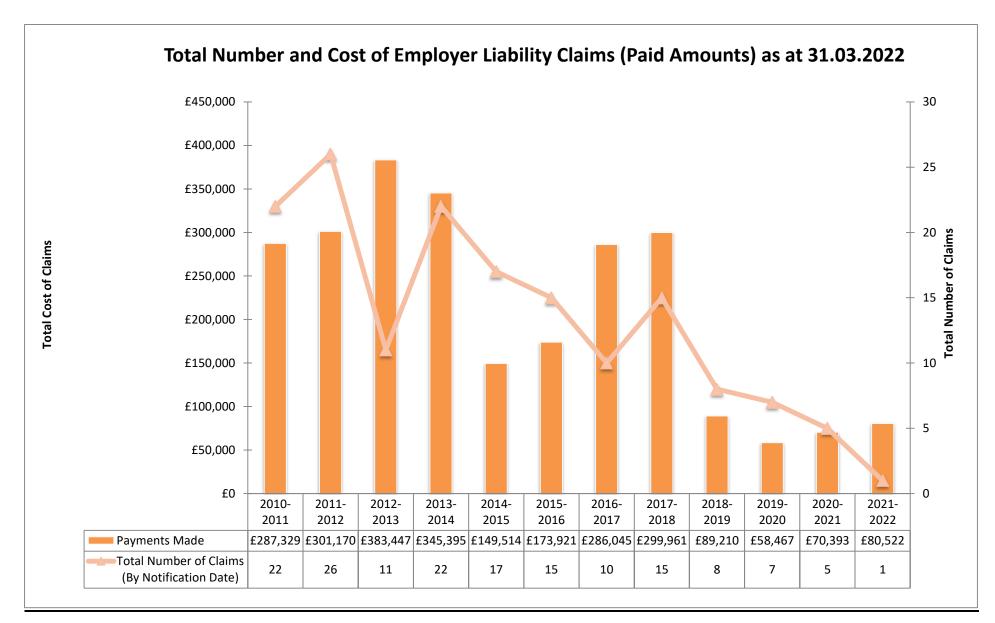
The Regulation of Investigatory Powers Act 2000

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 January 2022 and March 2022 the Council authorised no RIPA's.

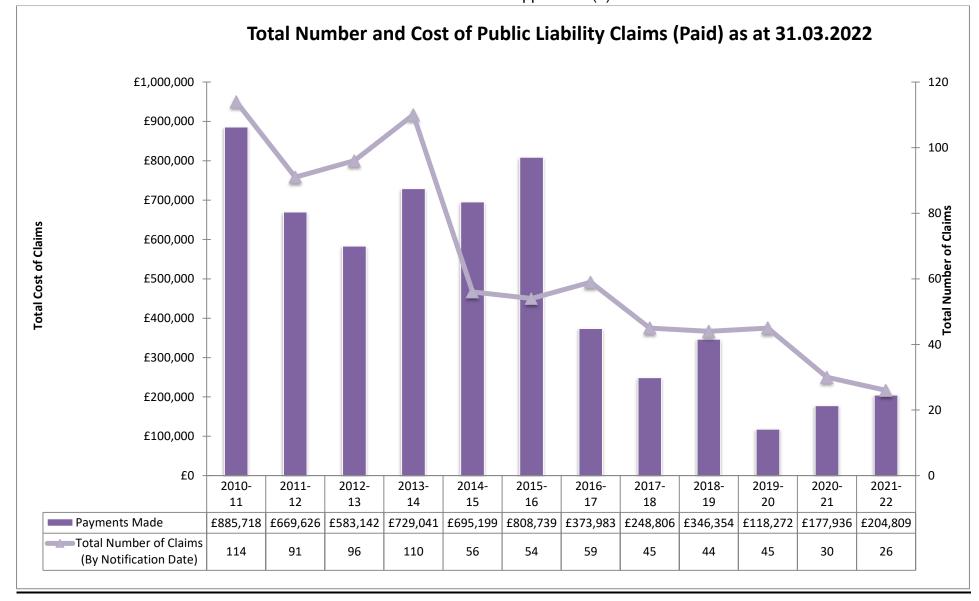
Insurance claims data

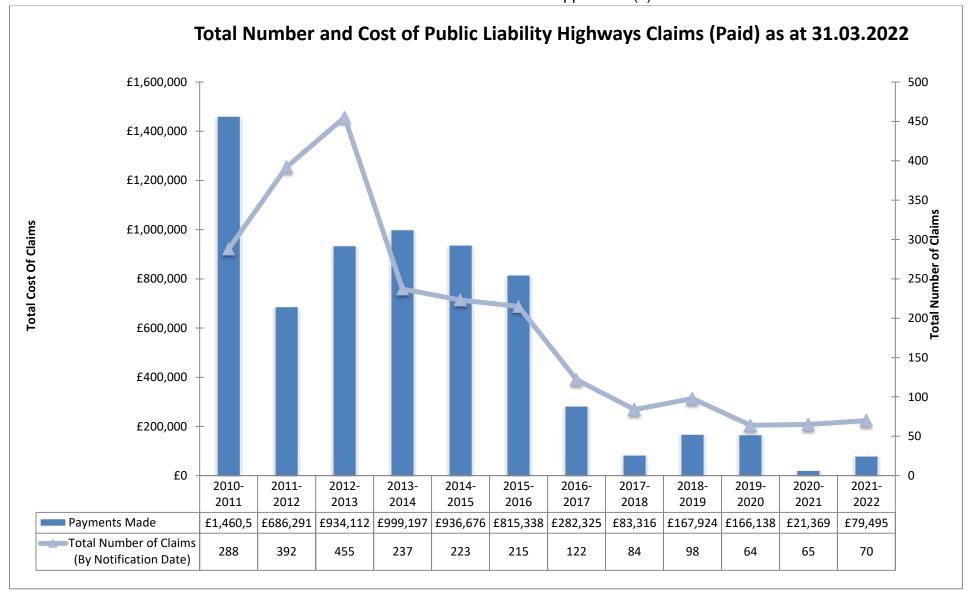
The graphs at Appendix B show the cost of liability insurance claims paid to date during each financial year by the Council.

3. Appendix B – Insurance Claim Payments by Financial Year



Blackpool Council: Audit and Risk Appendix 4(a)





Blackpool Council: Audit and Risk Appendix 4(a)

