ABERDEEN CITY COUNCIL

COMMITTEE	Audit, Risk & Scrutiny
DATE	26 November 2015
DIRECTOR	N/A
TITLE OF REPORT	Outstanding Internal Audit Recommendations Pre 2015/16
REPORT NUMBER	N/A
CHECKLIST COMPLETED	Yes

1. PURPOSE OF REPORT

1.1 This report advises the Committee of progress Services have made with implementing recommendations agreed in Internal Audit reports issued by PWC.

2. RECOMMENDATION

2.1 The Committee is requested to review, discuss and comment on the issues raised within this report and the attached appendices.

3. FINANCIAL IMPLICATIONS

3.1 There are no financial implications arising as a result of this report.

4. FOLLOW UP OF RECOMMENDATIONS

4.1 The details relating to recommendations made previously by PWC, which were due to be implemented by the end of September 2015, are shown in the attached appendix.

5. REPORT AUTHOR DETAILS

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Outstanding Internal Audit Recommendations   **Appendix A**

Report Title	Date Issued	Recommendation and Risk Rating	Update	Responsible Officer	Original Due Date	Revised date
Community Centres	Apr-14	Risk Rating - Medium The Council should take action to ensure that all leased community centres sign up to the new lease and management agreement. If necessary, payment of the Development Grant should be withheld until signed lease and management agreements are in place.	A report was taken to Communities, Housing and Infrastructure Committee in February 2015 recommending that the development grant was held for those Centres yet to sign up. The Committee did not accept this recommendation. A further report is expected to go to CHI on this issue at a future date. The further delay is in order to allow Committee Conveners to discuss the issue.	Service Manager, Sport and Communities	31-Dec-14	Previously advised 31-Oct-15 Now 31-Jan-16
Complaints Handling	Sep-14	Risk Rating - Low A complaints handling training package should be developed and included as mandatory training for any staff members involved in complaints handling. Management could consider utilising SPSO training materials as an alternative to developing a bespoke training package. These training materials should form a part of the induction process for new joiners. Refresher training should be mandatory for all staff members involved in the complaints handling process. This should include a	Procedural improvements are being implemented before rolling the training out across the organisation, so that all council employees are being trained using a consistent corporate approach. An online interactive learning (OIL) course has been developed and as recommended, the content is based on the SPSO training material. The OIL course will form part of the corporate training programme which will commence once a complaints web form is launched, providing a corporate method for all council officers to logging Frontline	Project Executive	31-Dec-14	31-Dec-15

		reminder of best practices in complaints handling, and details of new or updated procedures.	Complaints. Development of the online form is currently ongoing. Face to face training will then also be undertaken with frontline teams to reinforce the procedures and coaching provided to responding officers to improve the quality of responses. These actions are planned to commence before the end of 2015.			
Compliance with Laws and Regulations	Nov-14	<u>Risk Rating - Medium</u> · Legal Services will, in conjunction with Human Resources (HR) and the Services, perform a risk assessment to identify those laws and regulations for which breaches would have a significant impact on the Council. · HR, in conjunction with Legal Services and the Services, will compile a list of all training which addresses the laws and regulations identified in the risk assessment. Where gaps in available training materials exist, additional training will be developed. · HR, in conjunction with Legal Services and the Services, will assess the level of training required for each role. This exercise is already underway by HR but will now include any additional training identified in the risk assessment. · The output of the risk assessment	This is a substantial area of work. The task is currently being scoped and consideration of a revised timescale is dependent upon this. A way of progressing this has been agreed between the Service and Internal Audit.	Head of Legal and Democratic Services and HR Manager	31-Mar-15	The Service will report to the Audit, Risk and Scrutiny Committee in November 2015 regarding progress

		and newly created training material will be used by the Services to update job profiles, ensuring staff have an understanding of the mandatory training required. Completion of mandatory training for staff will be monitored and an appropriate process implemented for escalating issues with non-completion. Consideration should be given to including an annual sign off on the Your HR system which would be approved by line management during the performances management process.				
Carefirst	Feb-15	<u>Risk Rating - Medium</u> 1. Management should assign responsibility for reviewing and actioning the unmatched transactions report. Management may consider creating a dedicated role for this task as it would benefit from a technical understanding of CareFirst, knowledge of the Council's financial arrangements with suppliers and all client groups. 2.· Agreement will be reached on the criteria/ parameters to be used for deciding whether transactions should be investigated or not. The unmatched transaction report will be modified by the CareFirst Team to ensure it only includes the	1. The identification of a dedicated person with relevant experience remains outstanding, however, some data tidy up work has been undertaken by the CareFirst Team which will result in fewer unmatched transactions being created. Will be picked up as part of the Care Management Transformation Project. 2. As for 1	Head of Joint Operations	30-Jun-15	31-Mar-16 On completion of Care Management Transformation Project

		transactions for assessment before it is issued to the individual responsible for reviewing and actioning.			
		3.· Dummy invoices will be processed in CareFirst to remove illegitimate transactions. This will not impact actuals (which are reported through e-Financials) and will allow for accurate commitment reporting. The individual responsible for the unmatched transaction report should also be responsible for this task.	3. As for 1		
		4.· To ensure temporarily suspended care packages do not accrue costs, the person responsible for reviewing and actioning the unmatched transactions report should enter variances to offset the amount. A list of users who are not closing care packages as per the guidelines should be issued to Service Managers for appropriate action.	4. As for 1		
		5.· The completed unmatched transaction report should be reviewed and signed off by the responsible person's line manager on a monthly basis.	5. As for 1		
		6.· Consideration will be given to separating the roles of those who assess and manage frontline client needs and	6 This issue is part of the new Planning and Development Manager's workload and discussions are being held across the various sections to ensure that this is		

				actioned.			
Carefirst	Feb-15	<u>Risk Rating - Low</u> The Council should discuss with other Local Authorities the appetite for setting financial authorisation limits within the system. If popular this should be raised at the next OLM Systems meeting.	User Group meeting scheduled for August 2015 has been cancelled - awaiting rescheduled date.	Team Manager, Performance Management	31-Mar-15	30-Nov-15 following next User Group meeting
IT Disaster Recovery	Feb-15	<u>Risk Rating - Low</u> Telephony DR processes will be updated and tested, with the support of Getronics, as per their contractual arrangements	Contractual arrangements for DR ended March 2015 and tender for new arrangements is due to end July 2015. This will be done with winning supplier. Update as at 28 August: New contract due to commence on 1 September and action on target for completion within revised due date.	IT Manager	31-May-15	31-Dec-15
Service review	Feb-15	<u>Risk Rating - High</u> The definition, requirements and timeliness of a review under the Care Management Standards should be re-communicated to Care Workers via team meetings.	This issue has been discussed with service managers and team leaders at a service development day on 6 July with instructions to action the advice given by PWC immediately. Reviews form part of the Care management transformation project that is currently being undertaken by the planning and development manager in OP services.	Chief Officer, Health and Social Care	28-Feb-15	31-Dec-15
Services review	Feb-15	<u>Risk Rating - High</u> 1. Management should formally assess the staffing issues within SC&W and consider increasing the	1. Management has assessed the staffing issue with service managers and team leaders. Since the audit managers have carried out a	Team Manager, Performance Management	20-Jun-15	31-Dec-15

				and Systems Development Officer		
		resource budget if appropriate. 2. The following reports should be run on a monthly basis and distributed to the relevant teams who will action the closing or reassignment of the activities: a. A report detailing open activities which have no open service agreement. and; b. A report detailing open activities which are not assigned to the care worker who is currently assigned the care package. 3. The 'request for funding' activity should be renamed to 'review of care package' to ensure clarity on the purpose of the activity. The 'required date' field of the 'request for funding' activity should be made mandatory to ensure the activity can be used appropriately. Please note, OLM will be required to make these system changes. 4. Guidance on the purpose and operational use of the newly renamed activity should be created and distributed.	recruitment drive and made changes to the scheduling of reviews within work loads. Work is ongoing to define levels of reviews that are appropriate to the activities being carried out. 2. On-going piece of development work. Some data tidy up has already been undertaken and it will be concluded in the processes that form part of the Care Management transformation project. 3. Staff have been instructed to action this recommendation with immediate effect. 4. Draft guidance has been developed and will be issued once the Care Management Transformation project has been concluded.			
ICT Governance	May-15	<u>Risk Rating - Medium</u> The strategy will include the commitment to implementing an Enterprise Architecture governance framework and have the support of the corporate management team.	Following appointment of new Head of Service, IT and Transformation Service in May, a broader review of all relevant strategies has commenced with revision over the next 3-6 months. Revised date of	Head of IT and Transformation	31-Mar-15	31-Mar-16

		Including this commitment in the ICT strategy would reduce this risk to a low rating.	March 2016 to allow time for all relevant stage approvals.		
Stakeholder Engagement		Risk Rating - Low ·The importance of documenting analysis should be communicated to all relevant staff, ensuring that they understand the potential future value of work carried out. · Staff should also be made aware of the importance of retaining any analysis, so that it can be used both for future projects, and also to evidence the work having been undertaken.	Regular internal evaluation takes place with regard to the Aberdeen Pupil Voice group to evaluate effectiveness and in preparation for an external audit in February. Pupil Participation co-ordinators will be expected to ensure that appropriate methods of communication are in place to inform all staff/stakeholders and regarding the importance of retaining analysis/evidence. These expectations will be shared with all Head Teachers.	Development Officer, Pupil Voice	30-Jun-15	Meetings scheduled with Head Teachers Primary: 28-Sep-15 Secondary: 05-Oct-15 See below:
			Extra time was requested by Head Teachers for their agenda items at the above meetings and input regarding the above has been postponed for a subsequent meeting. Dates for these meetings have yet to be confirmed. The Service will advise Internal Audit when these will be and the subsequent outcome as soon as possible.			TBA
Section 75 Planning	Apr-15	Risk Rating – Low Heads of Service will appoint an appropriate 'point of contact' for their service with responsibility for responding to requests regarding Section 75 agreements.	The operation of S75 procedures is currently under review as part of a wider exercise concerning the Development Management function. It is intended that project management discipline will be applied to all aspects of case management, including S75 issues. The appropriate point of contact will be determined to reflect the circumstances of each project.	Head of Planning and Sustainable Development	30-Sep-15	TBC

Roads Construction Consent	May-15	Risk Rating – Low A checklist will be used formally to evidence that roads construction consent applications are in line with relevant standards and technical requirements. The checklist will also be used to record the review and comments of the relevant team member, and where necessary given the scale and complexity of the application, evidence of checking by a suitable qualified colleague.	An updated checklist has been developed and is being trialled before it is finally rolled out for all Road Construction Consents	Transportation Manager	30-Jun-15	31-Oct-15
Roads Construction Consent	May-15	Risk Rating - Low Management will implement monthly monitoring of KPIs to help identify periods of high demand in roads construction consent applications. Where periods of high demand become apparent, management will ensure that appropriate communication is maintained with external stakeholders as to the impact on timelines, and action will be taken internally to ensure that processes are maintained despite the increase workload.	Officers have made approaches through the Society of Chief Officers of Transportation in Scotland (SCOTS) as to KPIs in use across authorities to establish standardisation of measurement. Feedback is awaited. Officers are therefore adopting their own KPIs in the interim.	Transportation Manager	31-Jul-15	31-Oct-15
Roads Construction Consent	May-15	Risk Rating - Low On initial acknowledgement of the application, if a full and complete roads construction consent submission is received from the consultant or developer, management have indicated that	A new system to deal with Planning and Building Standard application is in the process of being purchased and introduced, with a current timescale for going live of end 2015. The incorporation of RCC into that system would follow and would be	Transportation Manager	31-Jul-15	31-Mar-16

		they will commit to providing a response to the application within four weeks. In delivering action 3.01, management will look to link the system for roads construction consent to the e-planning system currently used for planning applications by the Council.	projected for end of first quarter 2016.			
Roads Construction Consent	May-15	Risk Rating – Advisory We recommend that guidance on submission requirements for both stage 1 and 2 roads construction consent be made available on the Aberdeen City Council website for developers or consultants.	Steps to provide access to currently approved guidance have been taken with a link to the national web based information included. As this requires a link up with another authority its completion has been delayed. However, it will be complete by the end of November 2015.	Transportation Manager	30-Jun-15	Previously advised 30-Sep-15 Now 30-Nov-15
Compliance with the Public Records (Scotland) Act	Jun-15	Risk Rating – Low Management will develop a Register of Information Sharing Protocols as a resource for staff to consult for clarity on the circumstances and types of information that can and cannot be shared internally. Management will finalise updating the Council's Data Protection policy with consideration given to the possibility of streamlining the existing Data Protection procedures. Management will ensure the new policy is subject to regular, ongoing, review for compliance with current legislation and alignment with good	Revised Data Protection Corporate Policy & Procedures were approved by the Finance, Policy & Resources Committee on 15 September 2015. However, owing to staff absence / shortage, redevelopment of the Data Protection pages on the Zone (including development of an 'Information Sharing' section to include the publication, from existing Legal Services records, of a Register of Information Sharing Protocols) has been delayed.	Information Governance Officer	30-Sep-15	TBC

		practice				
Compliance with the Public Records (Scotland) Act	Jun-15	**Risk Rating – Advisory** Management are advised to review procurement policies and procedures and mode contract language to ensure that those engaging with the Council are contractually obligated to comply with the Council's information management standards.	Commercial & Procurement Services are, as part of the Procurement Achieving Commercial Excellence (PACE) Improvement programme, reviewing procurement policies and procedures and will mode the appropriate contract language to ensure that those engaging with the Council are contractually obligated to comply with the Council's information management standards. The revision of the Standing Orders/Financial Regulations is key to finalisation of this programme and it is expected that the revised Standing Order will be tabled at Council meetings in December and January respectively for Aberdeen City and Aberdeenshire Councils.	Head of Procurement	30-Sep-15	31-Jan-16