

## **INTERNAL AUDIT PROGRESS REPORT**

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### **REASON FOR REPORT**

This report provides the Audit Committee with a summary of Internal Audit (IA) activity in the period from 4 June 2011 to 31 August 2011. This fulfils the requirements of CIPFA's Code of Practice for Internal Audit in Local Government to bring to Members' attention periodic reports on progress against planned activity and any implications arising from Internal Audit findings and opinions.

The report also satisfies the Audit Commission requirements to keep Members adequately informed of the work undertaken by Internal Audit and of any problems or issues arising from audits

### **OPTIONS AVAILABLE TO THE COMMITTEE**

To note in-year progress against the Internal Audit Plan for 2011-12, and the updated position of those audits undertaken in 2007-8, 2008-9, 2009-10 and 2010-11.

### **1. INFORMATION**

1.1. In addition to the Annual Report, the Head of Internal Audit produces interim reports to Officers and Members throughout the year. These are approximately quarterly, summarise progress to date and bring to the attention of members any issues of note.

### **2. Progress against Plan and Follow up Status**

2.1. There are no significant causes for concern at this time with the levels of assurance being reported to the committee in the current year. Only five audits received Limited Assurance in the current period and plans are in place to address the weaknesses identified which we will be closely monitoring for implementation by management. All other audits had Satisfactory assurance, with five, including one school having Full assurance.

2.2. One prior year audit recently completed, Project Management (MCP), raises issues that will need to be added to the Annual Governance Statement. Following comments from the external auditors I have agreed that the limited report on the 2010-11 creditors also merits inclusion in the AGS. Appropriate wording has been agreed with the AGS working group.

2.3. The current status of this year's plan is included in Appendix 1.

2.4. The progress and status of those audits carried out in 2007-8, 2008-9, 2009-10 and 2010-11 is included in Appendices 2, 3, 4 and 5.

2.5. It was anticipated when setting the plan that amendments will always be needed to accommodate the changing needs of the Council. Amendments made up to the 31 August 2011 have all been additions to the planned work. These can be accommodated from the contingency provision at this stage.

2.6. The additions to the plan are as follows:-

**Pulse – Recruitment Checks** – Added at the request of the Social Care, Recruitment and Retention Manager to confirm that Pulse staff provided to us had completed the full requirements of the recruitment procedure. The contract for the supply of unqualified social care workers was due for review and the audit results informed this process.

**Music Service Private Fund** – Added at the request of the Head of Adult Education who had taken over responsibility for this service area following the Council re-structuring.

**Economic Development** – This was a planned audit for 2010/11 that was deferred until 2011/12 due to new protocols that were being introduced.

**New Year's Green Lane Weighbridge** – Added to plan by Internal Audit.

2.7. Unless otherwise stated, all reports have an action plan agreed with internal audit.

2.8. Summaries of the outcomes of the audits completed in the period are provided below.

**Audit Title: Homecare ECMS – Manual Logins**

**Assurance level:** Limited

The audit review was carried out as three cases were brought to our attention where it appeared that homecare services had been charged for when the service was not actually provided. Two were where the service users had been admitted to hospital and one was where the service user was attending a Day Centre and no longer required homecare on that day. For all three cases, the ECMS entries were all from manual timesheet records and not from using the client's telephone.

This review concentrated on these three cases in particular and the use of manual entries on the ECMS. A comprehensive review of homecare is planned to take place later in 11/12 which will cover all aspects of the external provision of homecare services. This will review the weaknesses identified in the Care Management Team during the course of this audit.

The audit objective was to ascertain the circumstances of the three cases and make recommendations where necessary to strengthen controls.

We were pleased to report risks are appropriately addressed in these areas:

- Prior to our investigation, the Contracts Team had been working on developing a system to flag up manual logins that exceed the acceptable tolerance level and track the home carers who consistently use manual login's.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
The Contracts Team should discuss with the provider the two cases identified where the legitimacy of the claims may be in question. If not investigated, the Council may have paid for a service that was not delivered.	High	31 August 2011
Reports from the Electronic Call Monitoring System (ECMS) System should be produced and monitored in order to identify if providers exceed their manual logging parameter. If so, this should be brought to their attention and payments should not be paid, unless sufficient evidence is presented to prevent the Council from paying for Homecare not received.	High	31 August 2011
The Contracts Team ensure that all homecare providers have produced a list of service users who refuse to let home carers log in and out using their telephone, in order to discuss alternative methods that can be used for logging in and out by the home carer. Otherwise, carers can manipulate the information on care provided.	Medium	31 August 2011
Reports from the ECMS system should be produced and monitored detailing visits commissioned by the Council and visits claimed by providers to identify anomalies.	Medium	31 August 2011

**Management Comment** - Whilst it is disappointing to have received an audit with Limited assurance this should be seen in context. The ECMS system processes approx 73% of all OPS PV Homecare spend; and 59% overall (approx £4.7m out of £8m). The annual number of transactions handled is estimated at 785,000; and the number of clients managed on the system is estimated at 1,250. The implementation of ECMS in 2006/7 has reduced Homecare spend by a minimum of £0.25m/annum as the service was able to challenge supplier invoices and they in turn adapted to invoice only for time behind the door.

The audit recommendations in respect of reports were already In Progress pre-audit and have now been completed.

**Audit Title: Oracle Financials – Debtors IT System**

**Assurance level:** Limited

The Council implemented the system in October 2010. It is the Corporate Accounts Receivables (AR) module of Oracle Financials. The Corporate AR application is primarily used by the Corporate Debt Team although access is also given to a selection of staff across the Council for posting receivables.

The administration of the Corporate AR application is the responsibility of the ICT Business Partner Team, while the Council’s outsourced provider NorthGate provides system and server maintenance.

The objective of the review was to ensure all processing carried out by the system is complete, accurate, timely and secure.

We were pleased to report risks are appropriately addressed in these areas:

- An access hierarchy has been defined on the Corporate AR application to segregate user privileges.
- Access to the Corporate AR application can only be granted with approval from the Corporate Debt Manager, who is the owner of the application.
- A password policy has been defined to manage the construction of user passwords when accessing Oracle Financials.
- A process has been developed to identify and disable leavers’ access to Oracle Financials.
- A contract is in place with NorthGate to provide maintenance support for Oracle Financials.
- A backup schedule has been designed for the servers that host Oracle Financials.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
The Corporate Debt Manager should periodically review a report of access and hierarchy to ensure no one has excessive privileges and redundant accesses are identified as a result of changes to staff roles and responsibilities.	Medium	Immediate
Provided that there is no serious adverse effect to	Medium	1 September

performance, the Council should enable auditing functions to database records to enable changes to key information to be traced retrospectively.

2011

The current reporting arrangement should be revised to ensure that all errors in batch files imported from the on-line payments system onto the Corporate AR application are reported so that they can be addressed.

Medium 1 September  
2011

**Management Comment** - This is a fair reflection of the current position and that the outstanding applications will be completed to given timescale.

### **Audit Title: Fusion Contract Management Audit 2010/11**

**Assurance level:** Limited

The new Hillingdon Sports and Leisure Complex costing £31 million was opened in January 2010, offering a new sporting and healthy living hub for everyone in the community.

in February 2010, the council entered into partnership agreement with Fusion Lifestyle an independent registered charity, to manage the complex on behalf of London Borough of Hillingdon.

One of the objectives of the Council is to increase participation in physical activities and sports within the Borough.

The objective of the audit is to ensure that there are adequate and effective processes in place to manage the partnership with Fusion Lifestyle.

We were pleased to report risks are appropriately addressed in these areas:

- Health & safety policy and responsibilities of Fusion Lifestyle
- Sports centre staff CRB checks
- Security and safety at the complex
- Leisure services, fees & charges
- Leisure centres Insurable risks
- Advertisements and Publicity
- Complaints procedure and users survey

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Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Management should set a time-table for resolving the issue of signing the Fusion contract and ensure that procedures are in place which prevents a similar situation arising in any future contract. This will avoid any disputes and associated legal costs and maintains an audit trail, if key staff on either side changes.	High	September 2011
The Corporate Construction Manager should negotiate with the contractors to accept repairs of the defects to ensure that LBH do not incur costs that are due to the contractors.	High	September 2011
Wherever possible costs incurred by the Operator prior to the opening of the centre should be deducted from the Contractor's retention to ensure that LBH do not incur unnecessary costs.	High	September 2011
Minutes of weekly meetings should be produced so that there is an audit trail of decisions made. In the absence of key personnel, follow ups or corrective action regarding health & safety issues may not be taken or delayed, leading to harm or injury.	High	September 2011
The Corporate Construction Manager should liaise with the GM of the Leisure Centre to ensure that the outstanding bills are settled by the appropriate contractors. Without amicable resolution of the utilities bills the onus of bill payment may fall on the council.	High	September 2011

**Management Comment** - The Deputy Chief Executive and Corporate Director of Planning, Environment, Education and Community Services has confirmed that all of these issues are being dealt with as a high priority and that the Leader is also involved in bringing about a resolution

**Audit Title: Residential to Independent Living (Swakeleys Road) 10/11**

**Assurance level:** Limited

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LBH's Swakeleys Road Supported Housing unit provides a transition service (from six months to two years) for adults with a learning disability to learn the skills needed for independent living. The Floating Support Outreach Team support Swakeleys Road by offering person centred services to each resident who lives in their own or in unstaffed shared tenancies.

During the course of the audit, Management of the home brought to our attention some financial irregularities they had identified and as a result of this we reviewed the financial processes in place at Swakeleys Road as part of the audit. This included benchmarking against processes already in place at Goshawk Gardens, a similar service.

The objective of the audit is to ensure that the transition from Swakeleys Road Supported Housing Unit to independent living is efficient, effective and economical.

We were pleased to report risks are appropriately addressed in these areas:

- All Supported Housing Workers and the Supported Housing Unit Managers hold the relevant NVQ qualification in Care of at least level 3.
- Daily log records detailing support provided to service users at Swakeleys Road are maintained.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Operational procedures should be produced guiding Swakeleys Road staff on how to produce, review and authorise Support Plans. If staff are not fulfilling their basic duty, then residents are at risk from not receiving co-ordinated support to enable them to move out of Swakeleys Road.	High	August 2011
Financial guidance covering the following areas should be produced relating to: <ul style="list-style-type: none"> <li>• Financial support that residents should receive from Swakeleys Road staff whilst in supported housing and when living independently</li> <li>• Discouraging residents from lending money to other residents</li> <li>• Advising residents how much money they should keep within their safes at all times</li> <li>• Ensuring residents have a unique pin code to gain entry to their safe</li> <li>• Staff conducting a monthly review with residents of their spending</li> <li>• Encouraging residents to pay rent and amenities</li> </ul>	High	August 2011

charges by direct debit/standing order  
Maintaining a record of items put into/taken out of the safe within Swakeleys Road.

The Service Manager for Personalised Services should establish why the decision to provide only floating support at certain times was not authorised and establish if any disciplinary action needs to be carried out. If residents do not receive regular contact and support, Swakeleys staff cannot ensure residents are leading a happy, safe and healthy lifestyle within the community. High July 2011

The rent and amenities charge payable by each tenant should be reviewed on an annual basis by the Social Care, Health & Housing Finance Team. If charges for rent and amenities are not reviewed on an annual basis, cost will be under recovered, putting pressure on the council's overall budgets. Medium February 2012

The Service Manager for Personalised Services should request assurances from the Team Manager for Personalised Services confirming six month and yearly PADAs have been completed for all staff. If PADAs are not reviewed staff performance cannot be tracked and reviewed. Training needs and poor performance are not identified. Medium July 2011

The Team Manager for Personalised Services should ensure that 1-2-1 supervision meetings for Swakeleys Road staff are conducted by the Sheltered Home Unit Manager on a monthly basis. If regular 1-2-1 supervision meetings do not take place, issues affecting staff and their performance are not identified, potentially leading to long term sickness or low motivation because staff do not feel supported. Medium July 2011

**Management Comments** – The Corporate Director of Social Care, Health and Housing has explored in some detail with the Head of Service and they are satisfied that the required actions are in hand.

**Audit Title: Project Management-MCP (2010-11)**

**Assurance level:** Limited

Spend on major constructions is significant, £13.2 million was spent in 2010/11 while a total sum of £45 million has been budgeted for 2011/12. The council has a programme that is aiming to deliver improvement in the areas of Education, Housing and Leisure services.

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The objective of the audit is to determine and verify that management have put adequate and effective control processes in place.

We were pleased to report risks are appropriately addressed in these areas:

- Strategy, policy and procedure
- Key stakeholders' involvement

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
All relevant decision making documents in the tendering and selection process such as the PQQ should be securely kept because in the event the council is challenged it needs to provide sufficient evidence to avoid any penalties.	High	Immediate
An investigation should be conducted and reasons established for the sudden cost escalation on the Laurel Lane Primary School project to guide against future occurrence.	High	August
Cabinet should be informed of the reasons when contingencies are used on projects, giving reasons and costs, to enable adequate challenge to take place on projects. This will ensure the council does not use scare resources on a few projects rather than many projects.	Medium	Immediate
An invoice should be raised to recover £16,977 from Laurel Lane Primary School so that the council does not incur the expenditure.	High	July 2011
Post completion information should be produced so that lessons can be learnt and council's project management can improve efficiency and effectiveness.	Medium	August 2011

**Management Comment** - The Deputy Chief Executive and Corporate Director of Planning, Environment, Education and Community Services has agreed the Control Improvements required. She has confirmed that systems have now changed in the department and that both she and audit will monitor the implementation of the recommendations. She has also satisfied herself that the necessary control actions are in hand

**Audit Title: Financial Assessments****Assurance level:** Satisfactory

The Financial Assessment Team assesses service users for their financial contribution towards the cost of their care package. They also ensure that all referrals are in receipt of the benefits they are entitled to. Where relevant they work closely with the Police and the Fire Brigade to review the safety and independence of clients in their own home.

The team's primary objective is to financially assess a service user's financial contribution towards the cost of their care package in line with the relevant legislation / charging policy. The team also carry out an annual review of every service user's assessed contribution.

The objective of the audit is to ensure financial assessments are being undertaken promptly and accurately.

We were pleased to report risks are appropriately addressed in these areas:

- Policies and procedures were up to date and accessible to all staff.
- Visits are carried out for each assessment at the earliest point possible
- Assessments were accurate and authorised.
- The Income Team is notified promptly of all contributions payable.
- Charges are promptly put against properties where clients own their own property.
- Annual reviews are carried out promptly.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
A statement must be added to the Financial Assessment Application Form stating that we may use their information for the prevention and detection of fraud; otherwise the Council may find it difficult to justify using the data for these purposes.	High	31/8/2011
Reports should be produced and monitored on a monthly basis so management can review the assessment dates otherwise late assessments may not be queried and the council may lose revenue because assessments cannot be backdated.	High	31/8/2011
Laptops must be locked away securely when not in use, and kept out of sight otherwise they are an easy target for thieves.	High	31/7/2011

**Audit Title: Referrals and Assessments****Assurance level:** Satisfactory

The Referral and Assessment team are the first in line to deal with any concerns about a child's welfare. Referrals received are screened, processed and investigated before a decision is made.

The objective of the audit is to ensure that all children who are referred are assessed and protected from any significant harm.

We were pleased to report risks are appropriately addressed in these areas:

- Detailed procedures available on Horizon in line with the Department of Health's 'Framework for the Assessment of Children in Need and their Families'
- There were adequate processes in place to ensure staff had valid CRB checks within the Referrals and Assessments Team.
- The referrals process was compliant with documented procedures.
- Initial plans and initial assessments records were completed, recorded and authorised in line with procedures.
- There was adequate performance information collated and published to monitor outcomes.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Procedures should be updated to include the seven-working-day timescale for carrying out initial assessments as set out in the national indicators.	Medium	September 2011
Overdue assessment should be reviewed to Identify the cause of the delay and whether alterations in training, processes or staff are needed in order to ensure quality of service delivery.	Medium	June 2011

**Audit Title: Parking Cash Collection****Assurance level:** Satisfactory

Hillingdon Council owns 217 Pay and Display machines, which are situated throughout the borough and also operates schemes that charge for on street parking.

Car Park Management used to be based at Harlington Road Depot (HRD) but is now based at the Civic Centre. The LBH cash collectors however still take the cash from machines to HRD and BDI (Contractors) Collect monies from HRD.

The objective of the audit is to assess the adequacy of controls in place for Parking Cash Collections.

We were pleased to report risks are appropriately addressed in these areas:

- Parking machines have sufficient insurance cover
- Keys to open parking machines are linked to individual cash collectors.
- There is a clear audit trail to see when a parking machine has been opened and by who.
- Sealed cash boxes are collected on a regular basis.
- BDI promptly bank all monies collected.
- Reconciliations between income collected as per parking machine tickets and income banked are undertaken.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Procedures for parking cash collection should be updated to ensure all tasks carried out are reflected clearly within them. Otherwise, inconsistent practices may occur as staff have no up to date source of reference.	High	8 <sup>th</sup> July 2011
The council should re-tender the cash collection contract to ensure value for money is being obtained.	High	31 <sup>st</sup> August 2011

**Audit Title: Residential Care Contracts**

**Assurance level:** Satisfactory

Six authorities are part of the West London Alliance who are pooling together their financial resources and using it to bargain with care home supplies.

The Hillingdon Care Services Inspection Team has been established since December 2007 to ensure the council takes a more active role in ensuring that all care homes used by the borough, meet quality standards.

The audit objective was to ensure the Residential Care Contract is efficient, effective and economical.

We were pleased to report risks are appropriately addressed in these areas:

- Invoices are only paid for amounts authorised by the panel and recorded on Controcc.
- A specialist resource panel is in place which reviews each case in order to make decisions on care/expenditure
- All placements exceeding the council's target expenditure had been authorised by service management.
- Capturing and recording of complaints.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Once the restructure is complete the Social Care Inspection Team should update procedures to reflect current operational processes in order to avoid inconsistent practices being adopted.	Medium	1 July 2011
A schedule should be maintained on the shared drive of recommendations made after inspections and when they should be followed up and when they are followed up, to ensure they have been implemented. This will ensure follow ups are not missed and the council takes prompt action against care homes that are not implementing recommendations.	Medium	10 June 2011

**Audit Title: Targeted Youth Support Team 2010/2011**

**Assurance Level:** Satisfactory

The Targeted Youth Support Team (TYST) is responsible for delivering early intervention programmes for those young people identified by partner agencies as being "at risk" of a wide range of factors such as offending, anti-social behaviour, teenage pregnancy, school exclusion or truanting, family breakdown etc.

TYST provides support and assistance to young people by challenging poor behaviour, developing young people's aspirations and by supporting the family. Without early intervention services there is a risk that these young people are the most likely to require

input from higher tier and more expensive services in the future. The service is a voluntary one which young people and their carers may choose not to engage with.

The objective of the audit was to ensure that there were appropriate processes in place to ensure that there were adequate and timely intervention processes in order to achieve the desired outcomes.

The audit also included a review of the financial systems of both the TYST and Youth Offending Service.

We were pleased to report risks are appropriately addressed in these areas:

- Service purpose and objectives
- Case management
- Performance management
- Training
- Business continuity planning

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Value Added Tax should be accounted for in imprest account records otherwise the Council cannot reclaim these monies.	High	Immediate
Purchase orders must be created prior to paying invoices otherwise expenditure commitment would not be known which could result in budget overspending.	High	June 2011
Management quality checks of client files should be evidenced by signature and date otherwise files may not have been checked and any file irregularities would not be identified.	Medium	June 2011
Copies of staff lone working risk assessments should be made available to staff otherwise the mitigation of risks to staff cannot be demonstrated which could have compensation implications if staff are harmed.	Medium	June 2011
Staff expense claims should be reimbursed via Payroll in compliance with corporate policy to ensure accuracy of coding and statistical information.	Medium	June 2011
Keys used to secure cash should be removed from the Targeted Youth Support Team premises overnight as best practice to reduce the risk of cash loss.	Medium	June 2011

TYST sub-imprest petty cash float monies should be regularly reconciled and evidenced by two officers otherwise there is no internal check and losses and errors may not be promptly identified. Medium June 2011

**Audit Title: Safeguarding Children & Quality Assurance**

**Assurance level:** Satisfactory

Hillingdon has a statutory Local Safeguarding Children's Board (LSCB), which meets 5 times a year.

There are currently 420 looked after children under review, with another 240 children on a Child Protection Plan.

There are 10 National Indicators that relate to children's social care and these are monitored by the Safeguarding Children and Quality Assurance Team.

The objective of the audit was to ensure vulnerable children are protected through the services delivered by London Borough of Hillingdon.

We were pleased to report risks are appropriately addressed in these areas:

- A strategy is in place to protect children and young people in Hillingdon.
- A LSCB board is in place that meets 5 times a year.
- CRB checks are in place and renewal dates are monitored.
- All members of staff are registered with the GSCC (General Social Care Council).
- Procedures in place incorporate relevant legislation.
- A Child Protection Register is held that is updated regularly.
- Statutory reviews and case conferences are planned and conducted within set Government deadlines.
- Reviews and conferences are attended by other partners and are clearly minuted.
- Performance against National Indicators is validated and reported to SMT, with relevant service managers informed of results.

Improvements are needed to address risks in the following areas:

**Control improvements required**

**Risk**

**Agreed**

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		<b>Date</b>
The Safeguarding Children & Quality Assurance Service Manager should produce for the Deputy Director of Children and Families reports of all instances where dates have been identified as being incorrectly entered in Protocol care system. This will then given an indication of where the main problems lie and can be prioritised.	High	Sept 2011
The Deputy Director of Children and Families should address late uploading of reports onto Protocol by identifying those responsible and ensuring that appropriate training is provided. Decisions on care plans could be made based on inaccurate information.	High	Sept 2011
Management should introduce a process for reviewing the cases of children who are removed from the child protection register but subsequently re-entered on it to. This will ensure that the Council reviews its risk assessments process for removing children in the light of each experience.	High	Sept 2011
The service areas should be provided with the Protocol reports as well as the manually altered reports to allow them to recognise the level of error in their Protocol data. This will ensure that service areas are aware of the level of errors they are producing and will give a basis for change, reducing the use of resources taken away from front line services.	Medium	Sept 2011
Information on the Council website should be reviewed annually to ensure it is up to date and accurate, with the date of review recorded on the page. Without up to date information, the public could be using inaccurate information and guidance.	Medium	Oct 2011
Management should obtain exception reports on a monthly basis to analyse the performance of the SC & QA Team, ensuring that no case reviews or conferences are missed or delayed without good reason. Reviews that are overdue will not be identified which could lead to a child being at risk from harm.	Medium	Sept 2011

**Audit Title: Adult Education**  
**Assurance level: Satisfactory**

The Adult Education service provides a wide range of full and part time adult learning courses and activities, throughout the borough. A restructure took place during 2010 and there are now 53 established staff posts (equivalent to 42 full time employees).



Supplementing these 53 posts, there are 120 Sessional Tutors employed by LBH on a contractual basis to teach a variety of the courses provided. Each of these Sessional Tutors is required to sign a contract and agree to the terms and conditions determined by the Council.

The objective of the audit was to ensure that the management of the contracts and payments to Sessional Tutors was efficient and effective.

We were pleased to report risks are appropriately addressed in these areas:

- Tutors were required to agree a proposed schedule of work at the start of the academic year. Any changes to this schedule were re-sent to tutors every month requiring agreement.
- All payments had been authorised and sent to Payroll within the set deadlines ensuring payments to tutors were made on time.
- All additional pay claims had been authorised by three officers.
- A course viability policy is in place outlining the required number of enrolments for a course to proceed.
- A financial Consultant is employed to assist with budgeting the curriculum offer, in terms of funding received and the anticipated income.
- The HADES system has restricted access and data is backed up every day.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
All process should be introduced to ensure that all CRB renewals are identified and actioned in sufficient time, ensuring that learners are not placed at risk through negligence of the Council.	Medium	Sept 2011
The Contracts & Resources Manager should carry out quarterly reviews on the CRB central record, ensuring that all CRB's are valid and up to date. This will reduce the risk of learners being placed at risk by a tutor due to negligence of the council.	Medium	Sept 2011
The 'Course Code Generation' form required to set up courses during the year should specifically state that authorisation is required from the Head of Adult Education or a Curriculum & Quality Manager, to ensure that all new courses have been considered in terms of enrolment and financial viability.	Medium	Dec 2011
The Contracts & Resources Manager should obtain exception Audit Committee 28 September 2011 PART 1 – MEMBERS, PUBLIC & PRESS	Medium	Dec 2011

reports from the HADES system, showing all those work schedules that have altered since the previous month. Any schedules that have been altered should be checked to confirm that an up to date work schedule has been sent to the tutor and a signed schedule is held on file. Otherwise, inaccurate payments could be made to tutors due to the latest and most up to date work schedule held by Adult Education not being accurate.

A sample of payments should be reconciled monthly against the tutors work schedules before submission to Payroll, otherwise incorrect data may be sent to Payroll. Medium Dec 2011

Management should request monthly reports from Payroll detailing the actual payments made to sessional tutors. This should be reconciled against the total figure of the original data sent to Payroll with any discrepancies investigated further. This will ensure that the correct expenditure has occurred and any overpayments can be rectified. Medium Dec 2011

**Audit Title: Improvement Projects – 2010/11 Review**

**Assurance level:** Satisfactory

The audit related to the schemes managed by the Improvement Projects Team, based in the Highways and Green Spaces Service section of the previous Planning, Environment and Community Services group.

The team develops improvement projects; covering road safety, installation of pedestrian crossings, bus and cycle route measures, traffic congestion mitigation schemes, installation of new parking restrictions. The term contracts for a significant number of these works were allocated to one contractor (EnterpriseMouchel Ltd).

The audit objective was to give management an assurance that the controls and systems in place to monitor and manage contractors’ performance were adequate and effective.

We were pleased to report that the risks in the area of inspection and supervision of projects were appropriately addressed by the Improvement Projects team.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
The Head of Highways, Transportation and Planning Policy, in liaison with the Head of Finance for PEECS, should ensure	High	Completed

that the revised "Schedule of Charge Rates" is applied to the 2011/12 projects. Otherwise, the true cost of the project may not be recovered.

All relevant documents relating to the project should be held electronically on a shared folder, which should be accessible by all eligible members of the team involved with the improvement projects. Without such arrangements in place, documents may be held in several locations, making it difficult for management or a colleague to deal with any queries or progress with the project in the absence of the designated officer.

Medium      December 2011

Management should review and update the key procedures guidelines or process documents that staff should follow in managing the projects. Without clear procedures, there is a tendency for staff to use their own discretion, leading to inconsistency in practice and difficulty for anyone to independently follow the trail.

Medium      December 2011

The Head of Highways, Transportation and Planning Policy should ensure that the formal liaison meetings between the senior representatives of both parties, which were reconvened in April 2011, are held at least on a quarterly basis. Without such meetings the Key Performance Indicators (KPIs) may not be monitored effectively and any slippages in performance may not be identified and addressed promptly.

Medium      Completed

The Head of Highways, Transportation and Planning Policy should ensure that the results of KPIs, in respect of projects completed during 2010/11, are finalised, evaluated and any remedial measures are taken to address any slippages. Without accurate results for each year, it is difficult to draw conclusion on the viability of the contract and whether the extension should be granted for future year/s.

Medium      Completed

The Highways Team Leader, in liaison with the Principal Accountant, should develop a method of reconciling the subsidiary records against the transactions on Oracle Financials. Without effective reconciliations, any errors or miscodings may not be identified and the full cost may not be recovered from the funding authority.

Medium      December 2011

**Audit Title: Supporting People – 2010/11 Review****Assurance level:** Satisfactory

The audit related to the Supporting People (SP) programme managed by the Supporting People team based in the Social Care, Health & Housing Services (SCHH).

The Supporting People programme offers vulnerable people the opportunity to improve their quality of life by supporting them to live more independently and maintain their housing. To do this, the Supporting People programme provides housing related support to prevent problems that can often lead to hospitalisation, institutional care or homelessness. It can also help the smooth transition to independent living for those leaving an institutional environment.

The audit objective was to give management an assurance on the adequacy of systems and controls relating to the delivery of the Supporting People programme.

We were pleased to report risks are appropriately addressed in the following areas:

- Policies, procedures and strategies exist and are up to date.
- The Supporting People Programme grant is well managed by experienced staff with good knowledge of the programme.
- All commissioning decisions are now made by Cabinet or Cabinet Member.
- Good performance management arrangements are in place.
- The grant is making a significant contribution to the Council's corporate saving since it has been unringfenced.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
The Housing Support Commissioning Manager should ensure that the copies of Variation Letters, signed by both parties, are on file whenever the contract period is extended or any other amendments are made. Otherwise the contract may not be valid and we may not be paying the correct price or value for money may not be achieved.	High	1 <sup>st</sup> July 2011
The Housing Support Commissioning Manager should ensure that data cleansing on the new computer system (SPOCC) is completed before the planned date of July 2011, for formal post implementation review. Without good quality data, reliable management information may not be available.	High	22 <sup>nd</sup> July 2011

**Audit Title: Council Tax & National Non-Domestic Rates (2010/11 Review)**

**Assurance level:** Satisfactory

CTAX is the major source of income for the authority, whilst NNDR is collected on behalf of the government, but is then redistributed to local authorities on a per capita basis. Although Revenues Services is responsible for these statutory functions, a significant amount of work has been contracted out to Liberata UK Limited.

The audit objective was to give management an assurance that the controls and systems in place to monitor the contract for delivering these functions were adequate and effective.

This was the first year of the contract with Liberata UK Limited to provide major portion of the revenue services to this Council. The overall outcome of the partnership and the working relationship has been satisfactory. Broadly, risks are reasonably well addressed in most areas.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Revenue Services management should ensure that the reconciliations relating to the NNDR properties (like refunds, number of properties and their aggregate rateable values etc. ) between the Northgate and Oracle Financial systems, and against the Valuation Office's record are periodically carried out. Without satisfactory reconciliations, the accuracy of transactions cannot be relied upon and there can be a risk of unauthorised refunds or NNDR properties not been properly charged.	High	1/9/2011
Revenue Services management should review the current approaches taken by the Client Team, in conducting the sample quality checks, with a view to introducing a consistent approach and documenting the agreed protocol. Otherwise, staff may start using their own discretion and effective monitoring may not be carried out.	Medium	1/9/2011
The Senior Revenues Officer should ensure that a reasonable sample is selected to carry out quality checks on ALL staff. Supervisory checks carried out by them should be recorded and monitored for the resolution of queries. Otherwise, the effectiveness of exercise may not be transparent.	Medium	1/9/2011
Revenue Services management should seek evidence of	Medium	1/8/2011

quality checks carried out by Liberata management to confirm the integrity of the statistics produced. Otherwise, the integrity of statistics reported by Liberata management cannot be relied upon.

Corporate Accountancy should ensure that the CTAX and NNDR Income received for 2010/11 is satisfactorily reconciled against the control account. Thereafter, it should be formally handed over to the Systems & Control Team in Revenue Services to reconcile as an ongoing routine for 2011/12 and beyond to ensure that all income received has been properly accounted for in Council's records. Medium 30/9/2011

The system administration role, of granting access to the relevant computer systems, should be strengthened. Without such discipline, access may be granted to someone who is not entitled to it. Medium 1/9/2011

Revenue Services management should ensure that the existing policy and procedure documents are periodically reviewed and updated, otherwise the practices may not be compatible to management expectations. Medium 1/9/2011

### **Audit Title: Mayoral Services**

**Assurance level:** Satisfactory

The Mayor is the First Citizen of the London Borough of Hillingdon and her role is to represent the Council in the local community.

Duties carried out by the Mayor include chairing Council meetings, signing documents under seal, attending ceremonies, hosting civic events and attending events.

Every year, the Mayor chooses which charities to support and to help raise money for at charity events. This year the chosen charities are Hillingdon Mind, Hillingdon Child and Adolescent Mental Health Services (CAMHS), Woodlands Centre and Riverside Centre.

The objective of the audit was to ensure Mayoral Services is efficient, effective and economical within the borough.

We were pleased to report risks are appropriately addressed in these areas:

- All Regalia is held securely and appropriately insured

- A lease is in place for the Mayoral Car
- Licenses are checked annually
- Reconciliations are carried out monthly for both accounts held by Mayoral Services

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
Two officers should always be present when monies from collection boxes or monies donated at charity events are counted as if only one person is present, it would be difficult to defend allegations of misappropriation	Medium	With immediate effect
The Mayor's Office should request evidence from Barclays of the monies to the respective charities, otherwise if the full amount of donation monies are not paid to the charities by Barclays, the Council would not know.	Medium	With immediate effect

**Audit Title: Pulse (Recruitment)**

**Assurance level:** Satisfactory

London Borough of Hillingdon's corporate contract for social care (unqualified) agency workers is with Pulse. Pulse staffing are the contracted supplier for all temporary social care staff.

The corporate contract expired on 1<sup>st</sup> July 2011; however, it is proposed that while LBH embark on a formal procurement process, Pulse will continue to provide temporary agency staff in the interim period. An interim contract is currently being drafted.

The objective of the audit was to ensure that Pulse have completed the necessary recruitment checks on agency workers, confirming that they are suitable for social care work.

We were pleased to report the following:

- Pulse have adequate documented recruitment procedures in place for ensuring that only suitable staff are recruited to provide social care for LBH.
- All agency workers had completed the essential training requirements.

<b>Control improvement required</b>	<b>Risk</b>	<b>Agreed</b>
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***The Social Care Recruitment & Retention Manager should report our findings to the Account Manager for Pulse and obtain assurance that this situation is going to be improved. Going forward copies of the audit report should be obtained to enable the LBH to gain assurance and continue to monitor performance.***

Medium

**Target Date**  
With immediate effect

**Audit Title: Learning & Development**

**Assurance level:** Satisfactory

The Learning & Development (L&D) Service, which is part of the Central Services Directorate, works with operational managers to ensure that the workforce of the Council has the necessary skills, knowledge and behaviours to deliver the Council's priorities now and into the future.

The service's objective is to provide value for money solutions that contribute to the strategic success of the Council by maximising the potential of all its employees.

The objective of the audit was to review the arrangements in place to provide for efficient and effective arrangements for learning and development.

We were pleased to report risks are appropriately addressed in these areas:

- Publicity
- E-learning
- Recording of internal training received
- Feedback and review
- Charging

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
L & D to ensure that notifications they receive from staff of external training received are recorded in the computer system, otherwise incorrect statistical information would result.	Medium	April 2012
Ensure that Post Entry Training Agreements are in place for all professional qualification training, otherwise trained staff may leave immediately and Hillingdon will not get the full benefit of the investment.	Medium	September 2011



Induction training for new staff should be adequately monitored otherwise staff may not receive the required training which could result in them taking incorrect actions.	Medium	April 2012
Charging for courses to be made in advance, otherwise debts could accumulate and may be difficult to recover.	Medium	September 2011

**Audit Title: Establishment Control**

**Assurance level:** Full

Staffing costs account for a large percentage of the council's net expenditure. It is therefore very important to ensure that only authorised data on "establishment" is processed. Information on the establishment is maintained on ResourceLink.

The new staff recruitment system called I -Grasp was procured and implemented in March 2010 by Corporate HR. I -Grasp is used to manage recruitment i.e. authorisation & approval, advertising, interview process and pre-employment checks.

The objective of the audit is to ensure that the processes in place, to manage the council's establishment are efficient and effective.

We were pleased to report risks are appropriately addressed in these areas:

- Authorisation of amendments, deletion and addition of posts
- Restricted access to the ResourceLink
- I-Grasp e-recruitment system has five levels of authorisation
- The establishment is reviewed on a monthly basis

**Audit Title: Estate Services Contracts**

**Assurance level:** Full

On the 1<sup>st</sup> October 2010, the management and maintenance of Hillingdon's housing stock was returned to the council. The housing stock consisted of 10,372 tenanted dwellings and 2,938 leasehold dwellings.

The Estate Services is responsible for ensuring the council's estates are decent.

The contracts for Ground Maintenance, Tree Management and maintenance of Play Grounds on housing estates are included in the council's contracts for these services. The costs of providing these services are charged to the Housing Revenue Account.

The review did not cover payment to contractors, as this was covered in previous audits on Ground maintenance (Parks and Open Spaces) contracts issued on the 23<sup>rd</sup> February 2010 and Tree Maintenance issued on the 6<sup>th</sup> January 2010.

The audit objective was to ensure the contracts for providing services on the estates are managed efficiently, effectively and economically.

We were pleased to report risks are appropriately addressed in these areas:

- Roles and responsibilities are clearly defined
- Monitoring of Service delivery
- Performance management
- Recharging of costs

**Audit Title: Mortuary**

**Assurance level: Full**

The mortuary based on Kingston Lane is one of 2 mortuaries used by 6 local authorities, with the other mortuary based in Hammersmith. The 5 other authorities are Hammersmith & Fulham, Ealing, Hounslow, Kingston and Richmond.

In 2010/11 just under 1,000 post mortems were carried out at the mortuary on Kingston Lane. Over the last 5 years there have been between 700-900 post-mortems carried out.

The objective of the audit was to ensure that the receipting, recording and storage of valuables on bodies was efficient and effective.

We were pleased to report risks are appropriately addressed in these areas:

- For each stage and process within the mortuary, detailed and up to date procedures were in place.
- The mortuary has a valid licence to operate awarded by the Human Tissue Authority (HTA)
- The mortuary is audited on an annual basis by the HTA to confirm compliance with legislation. No significant issues had been raised in the last audit report.
- Bodies were stored in secure fridges, with accurate and up to date records of arrivals and departures and any valuables present on the body.
- Valuables not remaining on the bodies were stored in the safe which has an insurance limit of £1,000 and is situated in the manager's office which is locked overnight.
- Access to the mortuary is restricted.
- A Business Continuity Plan is in place should the mortuary become unavailable or equipment fails.

Improvements are needed to address risks in the following areas:

<b>Control improvements required</b>	<b>Risk</b>	<b>Agreed Target Date</b>
The Mortuary Technicians should sign and date the out of hours receipt book every morning once the reconciliation between this book and the valuables present on the bodies has been carried out and verified. Should a valuable or personal item be unaccounted for the Council could be open to accusations without a record of this check or the reconciling officer's name.	Medium	End of Sept 2011

### **Audit Title: Education Welfare – School Pupil Attendances**

**Assurance level: Full**

The Council's Education Welfare and Attendance Service have a statutory role as prescribed in the Education Act 1996 and the Education and Inspection Act 2007 in relation to school pupil truancy. This means that for pupils who fail to regularly and punctually attend a school or other education provision without good reason, an Education Welfare Officer may become involved.

Parents and carers have a legal duty to ensure their child attends school regularly. Failure to do so may result in penalties levied by the Council's Education Welfare and Attendance Service or prosecution in a magistrate's court which can lead to fines of up to £2,500 or three months imprisonment or parenting / community orders.

The Council's Education Welfare and Attendance Service contributes to the Council's themes of a borough where children and young people are healthy, safe and supported and a borough of learning and culture.

The overall audit objective was to review the adequacy and effectiveness of arrangements in place to reduce pupil absences from school.

We were pleased to report risks are appropriately addressed in these areas:

- Staff criminal vetting
- School attendance policies
- Case management
- Penalty Notices – truancy
- School register inspections
- Truancy sweeps

**Grant Certifications** – Internal Audit audited three grant claims and certified them all as fairly representing the eligible expenditure in accordance with the grant’s conditions. The three grants were Play Capital Grant, Stroke Care Grant and Contaminated Land Programme Grant.

### Schools’ Audits

The table below summarises the school audits finalised in the period.

2011/12	Assurance Level
<b>Schools - Primary</b>	
Bishop Winnington Infants	Satisfactory
Whitehall Infants	Satisfactory
Yeading Infants	Satisfactory
Whitehall Juniors	Satisfactory
Grange Park Infants	Full

### 3. Follow up audits

3.1. We continue to make progress in following up and clearing action points from previous audits. We have also started to follow up on the Hillingdon Homes recommendations that were carried out by.

3.2. The table below shows the results of follow ups for general audits and school audits. Implementation rates on follow ups have increased significantly from 79% to 90% in this period.

Audit Title	DATE ISSUED	HIGH	MEDIUM	LOW	IMPLEMENTED HIGH	IMPLEMENTED MEDIUM	IMPLEMENTED LOW	NOT IMP'D - HIGH	NOT IMP'D MEDIUM	NOT IMP'D - LOW	REVISED TARGET DATE
Aids and Adaptations (Hillingdon Homes)	Jun-10	0	1	0	0	1	0	0	0	0	N/A
Business Continuity Mgt & CE	Jun-09	2	1	0	1	1	0	1	0	0	Jul-11
Hillingdon Grid for Learning	Dec-09	0	1	0	0	0	0	0	1	0	Jul-11
Ocella Application ICT 3rd f-up	Feb-09	0	1	0	0	1	0	0	0	0	N/A

HR Payroll Changes & Trigger Dates	Jun-10	4	4	0	4	4	0	0	0	0	0	N/A
Section 75 Agreement - 2009/10 Review	Oct-10	0	2	0	0	1	0	0	1	0	0	Oct-11
Highways (Responsive) Maintenance - 2009/10 Review	Sep-10	3	1	0	3	1	0	0	0	0	0	N/A
Disposals of ICT Hardware Assets - 2nd f-up	Sep-10	0	2	1	0	2	1	0	0	0	0	N/A
Grounds Maintenance	Feb-10	0	4	0	0	4	0	0	0	0	0	N/A
Civic Centre Security	Sep-10	6	3	0	6	3	0	0	0	0	0	N/A
Primary Sickness Scheme	Jan-10	1	0	1	1	0	1	0	0	0	0	N/A
Residential Care Contracts	Jun-11	0	2	0	0	2	0	0	0	0	0	N/A
Freedom of Information & Data Protection 3rd follow-up	Jun-10	1	9	1	1	9	1	0	0	0	0	N/A
Section 251 Statement 2nd f-up	Feb-11	0	1	1	0	1	1	0	0	0	0	N/A
Rent Payments(Hillingdon Homes)	Aug-10	1	1	0	1	1	0	0	0	0	0	N/A
LGPS Governance 3rd f-up	Sep-10	0	5	1	0	3	1	0	2	0	0	Dec-11
Remote Access Audit (ICT)	Jul-09	0	3	0	0	3	0	0	0	0	0	N/A
Business Continuity Planning (ICT)	Jul-08	0	2	2	0	2	2	0	0	0	0	N/A
Help Desk Review Audit (ICT)	Mar-09	0	4	0	0	4	0	0	0	0	0	N/A
IT Disaster Recovery Audit (ICT)	Apr-10	1	3	0	1	3	0	0	0	0	0	N/A
Rural Activities Garden Centre	Oct-10	2	5	0	1	3	0	1	2	0	0	Dec-11
Email Security & Management (ICT) 3rd f-up	May-09	0	1	0	0	1	0	0	0	0	0	N/A
Responsive Repairs (Hillingdon Homes)	Oct-10	1	1	0	1	1	0	0	0	0	0	N/A
Equipment and Adaptations	Mar-11	2	7	1	2	7	1	0	0	0	0	N/A
Compliance With Driving Policy	Jun-11	2	0	1	2	0	1	0	0	0	0	N/A
West Drayton Primary	Jan-11	3	6	1	2	3	1	1	3	0	0	Sep-11
St Andrew's Primary	Jan-11	2	4	1	2	4	1	0	0	0	0	N/A
Chantry Special	Nov-10	17	11	0	16	11	0	1	0	0	0	Sep-11
Grangewood Special	Oct-10	3	0	1	1	0	1	2	0	0	0	Sep-11
Fleet Management (Hillingdon Homes)	Aug 10	0	3	0	0	2	0	0	1	0	0	Sep 11
Supporting People	Jul-11	2	0	0	1	0	0	1	0	0	0	Nov-11
Software Licensing	Oct - 10	1	11	2	1	11	2	0	0	0	0	N/A
		<b>54</b>	<b>99</b>	<b>14</b>	<b>47</b>	<b>89</b>	<b>14</b>	<b>7</b>	<b>10</b>	<b>0</b>		
<b>% Implemented by Risk</b>					<b>87%</b>	<b>90%</b>	<b>100%</b>					
<b>Overall % Implemented</b>								<b>90%</b>				
<b>Overall % Not Implemented</b>								<b>10%</b>				

3.3. Details of audits followed up, but where High or Medium risk issues remain outstanding are as follows:

<b>Audit Title</b>	<b>No. of Outstanding Recommendations</b>	<b>Revised Target Date</b>	<b>Comment</b>
Carefirst Debtors- 2009/10 Review	1	Mar 2011	Follow up In Progress
Hillingdon Grid for Learning Business Continuity Management & Civil Emergency	1	Jul 2011	Follow up In Progress
Data Security and Transfer	1	Feb 2011	Follow up In Progress
Debt Recovery Processes - 2009/10 Review	3	Sep 2011	
Subsistence	2	Sep 2011	
Wood End Park	1	Mar 2011	
Utilities Gas and Electricity	2	Jul 2011	Includes 1 Low
Budgetary Control	5	Sep 2011	Includes 2 Low
Private Sector Leasing 07/08	1	Jul 2011	Follow up In Progress
Securicor	1	Dec 2011	
Domestic Waste - Civic Amenity sites	1	Dec 2011	
Highways – Planned Maintenance	3	Mar 2012	
Performance Management	1	Dec 2011	
Ruislip High Secondary School	3	Dec 2011	
Cherry Lane Primary	1	May 2011	
Stray Dogs	1	Sep 2011	
Asylum Accommodation	3	Oct 2011	
Private Sector Renewal Grants & Disabled Facilities Grants	1	Nov 2011	
Dr Triplett's	1	Jul 2011	
Glebe Primary	1	May 2012	
Mental Health	1	Aug 2011	
Parking Permits	2	Sep 2011	
Culture & Arts	4	Jul 2011	Follow up in progress
Local Government Pension Scheme Governance	2	Dec 11	

<b>Audit Title</b>	<b>No. of Outstanding Recommendations</b>	<b>Revised Target Date</b>	<b>Comment</b>
Street Cleansing	3	Sep 11	
Temporary Accommodation	1	Sep 11	
Section 75 Agreement	1	Oct 11	
Rural Activities Centre	3	Dec 11	
Fleet Management (HH)	1	Sep 11	
West Drayton Primary	4	Sep 11	
Chantry Special	1	Nov 11	
Supporting People	1	Nov 11	

#### **4. Advice Guidance and Consultancy**

Management continue to request ad hoc advice from us on operational issues within their service.

#### **5. Anti Fraud Work**

5.1. We completed one anti-fraud audit during the period on write-offs. Our sample testing found that the debts written off had been authorised at the appropriate level as per the Schemes of Delegation. We did find some areas for improvement in the recording processes and these have been raised with the appropriate officers.

##### **Fraud Awareness**

5.2. The next Fraud Awareness Bitesize session is due at the end of September 2011.

5.3. The new e-Learning Pool module on Fraud is now in place. We will be monitoring the usage rate going forward.

##### **National Fraud Initiative (NFI)**

5.4. The data match reports from the NFI are being investigated by directorates and we are monitoring progress on the investigations to ensure that they are being investigated promptly and properly.

##### **Other work**

5.5. Six confidential investigations are underway and the results of these will be reported upon conclusion of the investigations.

5.6. The outcomes of those confidential investigations that have been concluded are contained in Part II of this report.

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Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
<b>CROSS CUTTING CORPORATE ISSUES</b>							
<b>Anti Fraud and Investigation</b>							
National Fraud Initiative (NFI)	Ongoing						
Anti Fraud Promotion	Ongoing						
Fraud/Irregularity Investigations	Ongoing						
Planned proactive (to be determined):							
- Write-off Probity	Finalised	15-07-11	Full	N/A	0	2	2
- Disabled Parking Bays	In Progress						
- Mayoral Services	Finalised	22-8-11	Satisfactory	N/A	0	2	4
- Imprest Accounts	Drafting						
- Leisure Link Card	Planning						
<b>Other Cross-Cutting</b>							
Annual Governance Statement - Audit	Completed						
Advice and Information (Ad hoc)	Ongoing						
Consultancy Advice - Specific Projects	Ongoing						
Pre-Loaded Cards							
Employee Expenses - Automated Payments							
Establishment Audits - to be determined							
<b>Misc Audit tasks</b>							
Follow ups	Ongoing						
Brought forward Audits	Ongoing						
<b>CENTRAL SERVICES</b>							
<b>Finance</b>							

Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
Creditors							
Debtors							
Budgetary Control							
Capita On-Line Payments	Planning						
<b>Central Services</b>							
Economic Development	Draft issued						
<b>Human Resources</b>							
Agency & Interim Approvals	In Progress						
CRB Checks							
Employability Status - Permanent Staff	Draft Issued						
HR Payroll Changes & Trigger Dates							
<b>Audit &amp; Enforcement</b>							
Planning Enforcement							
<b>SOCIAL CARE HEALTH &amp; HOUSING</b>							
<b>Adult &amp; Older People Services</b>							
Critical Team	Draft Issued						
Mental Health							
Assessment & Care Management - LD & PD							
Self Directed Support							
Stroke Care Grant Certification	Completed	27/06/2011	NA	NA	0	0	0
<b>Children's Social Services</b>							

Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
Play Capital Grant Certification	Completed	17/06/2011	NA	NA	-	-	-
Fostering	In Progress						
Adoption							
Emergency Duty Team	Planning						
Behaviour Support - Financial Systems							
<b>Hillingdon Housing Services</b>							
Housing Repairs & Maintenance - Responsive	In Progress						
Housing Repairs & Maintenance - Planned, including Major Works							
Housing Rents	In Progress						
Empty Property Management							
Leasehold Management & Service Charges							
Tenancy Management	Draft Issued						
<b>Housing</b>							
Housing Needs							
Private Sector Housing							
Housing Supply	Draft Issued						
<b>Public Health</b>							
Public Health							
<b>PLANNING, EDUCATION SERVICES &amp; ENVIRONMENT, COMMUNITY SERVICES</b>							

Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
<b>Street Environment</b>							
Street Lighting	In Progress						
Highways - Reactive Maintenance							
<b>Corporate Construction</b>							
School Building Programme - Permanent							
School Building Programme - Temporary							
Construction Contracts - Final Accounts	In Progress						
<b>Green Spaces, Sport &amp; Leisure</b>							
Greenwich Leisure Ltd Contract	In Progress						
<b>Parking Services</b>							
Penalty Charge Notices and Appeals	In Progress						
<b>Transport Services</b>							
Fleet Management	In Progress						
<b>Property Services</b>							
Utilities Contracts - Water							
<b>Public Safety</b>							
Investigations Team							
<b>Consumer Protection</b>							
Food Health & Safety Services							

Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
<b>Business Services</b>							
Mortuary	Finalised	23/06/11	Full	-	0	1	1
Heathrow Imported Food Unit							
Passenger Services							
Cemeteries	Draft Issued						
Harlington Road Depot Fuel	In Progress						
Harlington Road Depot Stores							
<b>ICT</b>							
Customer Contact Centre	In Progress						
<b>Youth Services</b>							
Youth Services	Draft Issued						
<b>Other Education</b>							
Pupil Referral Unit							
Education Welfare	Finalised	14/07/11	Full	N/A	0	0	5
Early Years Centres							
School Admissions Service							
Psychology Service	Planning						
<b>Schools - Primary</b>							
Bourne Primary							
Minet Infants							
Firthwood Primary	Draft Issued						
Holy Trinity Primary							
Hillside Infants							

Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
Hermitage Primary							
Whiteheath Infants	Draft Issued						
Ryefield Primary							
Grange Park Infants	Finalised	19/07/2011	Full	N/A	0	0	2
Harmondsworth Primary							
Newham Junior							
Whitehall Junior	Finalised	29/06/2011	Satisfactory		2	1	1
Yeading Inf	Finalised	23/06/2011	Satisfactory		2	4	1
Yeading Jnr							
Breakespear infants							
Bishop Winnington Ingram	Finalised	03/05/2011	Satisfactory		0	4	1
Coteford Junior							
Deansfield	Draft Issued						
Ruislip Gardens							
St Bernadettes							
St Marys							
St Matthews							
St Swithun wells							
Whitehall Infants	Finalised	16/06/2011	Satisfactory		2	6	1
<b>Special</b>							
Meadow							
Moorcroft							
The Willows							
Hedgewood							
<b>Nursery Schools</b>							

Internal Audit Plan 2011-12 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
Mcmillan Nursery							
<b>ICT audit contract</b>							
Penetration Testing							
Adults and Children's Protocol	Draft Issued						
IT Strategy							
Disaster Recovery							
CAPITA – Online payments systems - Security	Draft Issued						
<b>Contingency Audits</b>							
Pulse (Recruitment)	Finalised	12/08/2011	Satisfactory	N/A	0	0	1
Contaminated Waste Grant Certification	Completed	Jun 11	N/A	N/A	0	0	0
Investigation 047	Completed	Jun 11	N/A	N/A	0	0	0
Investigation 048	Completed	N/A	N/A	N/A	0	0	0
Investigation 049	In Progress						
Investigation 050	Completed	N/A	N/A	N/A	0	0	0
Investigation 051	Completed	N/A	N/A	N/A	0	0	0
Music Service Private Fund Review	In Progress						
Economic Development	Draft Issued						
New Year's Green Lane Weighbridge	Planning						

Internal Audit Plan 2010-11 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
					H	M	L
<b>CROSS CUTTING CORPORATE ISSUES</b>							
IT Policy Compliance	Drafting						
Records Management	Finalised	01/06/2011	Limited		2	3	3
Compliance with Driving Policy	Finalised	03/06/2011	Satisfactory	30 <sup>th</sup> August 2011	0	0	0
Risk Management – Corporate Issues arising from individual Directorate audits	Finalised	03/06/2011	Satisfactory		0	4	2
<b>FINANCE &amp; RESOURCES</b>							
Debtors - ASC Protocol – ECMS Manual Logins	Finalised	8/8/11	Limited		3	2	, 0
CT/NNDR - System	Finalised	14/7/2011	Satisfactory		1	11	0
LG Pension Scheme - Governance	Finalised	30/09/10	Satisfactory	Aug 2011 – revised date Dec 2011	0	2	0
Creditors	Finalised	03/06/11	Limited		2	5	0
General Ledger	Finalised	31/05/11	Satisfactory		0	2	1
<b>DCEO</b>							
Learning & Development	Finalised	01/07/11	Satisfactory		0	4	7
Establishment Control and Authorisation	Finalised	24/08/11	Full		0	0	1
<b>EDUCATION &amp; CHILDREN'S SERVICES</b>							
<b>Schools - Primary</b>							
Cherry Lane Primary	Finalised	02/09/10	Limited	Jan 2011 – revised date May 2011	1	0	0
Glebe Primary	Finalised	19/7/10	Satisfactory	May 2011 - revised date May 2012	1	0	0
Botwell House	Finalised	03/09/10	Satisfactory	May 11	0	0	0



Internal Audit Plan 2010-11 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of Last Follow Up	Number of outstanding recommendations		
Dr Triplets CE	Finalised	16/09/10	Satisfactory	May 2011 - revised date Jul 2011	1	0	0
Field End Infants	Finalised	28/09/10	Satisfactory	Jun 11	0	0	0
St Catherine's RC Primary	Finalised	07/10/10	Satisfactory	Jun 11	0	0	0
Highfield Primary	Finalised	12/11/10	Satisfactory	Follow up In Progress	1	2	1
Rabbsfarm Primary	Finalised	11/10/10	Satisfactory		1	0	1
West Drayton Primary	Finalised	26/01/2011	Satisfactory		1	3	0
Guru Nanak Sikh Primary	Finalised	27/04/2011	Limited		4	4	1
Lady Bankes Junior	Finalised	26/01/2011	Satisfactory		1	5	2
St Andrew's CE Primary	Finalised	02/12/10	Satisfactory	Jun 11	0	0	0
Brookside Primary	Finalised	20/01/11	Satisfactory		2	4	1
Warrender Primary	Finalised	30/03/2011	Satisfactory		3	3	0
Harefield Junior	Finalised	16/03/2011	Satisfactory		2	1	1
Laural Lane Primary	Finalised	15/03/2011	Satisfactory		3	4	3
Whiteheath Junior	Finalised	10/02/2011	Satisfactory		1	1	1
Lady Bankes Infants	Finalised	17/05/2011	Full		0	1	1
Oak Farm Junior	Finalised	11/05/2011	Satisfactory		0	2	2
Newnham Infants	Finalised	03/03/2011	Limited		5	5	1
Grange Park Junior	Finalised	18/05/2011	Satisfactory		1	5	2
Sacred Heart RC	Finalised	27/04/2011	Full		0	1	1
<b>Special</b>							
Chantry School	Finalised	11/11/10	No Assurance	Jun 11 – revised date Dec 11	1	0	0
Grangewood School	Finalised	18/10/10	Satisfactory	Jun 11 – revised date Dec 11	2	0	0
<b>Other School Related</b>							

<b>Internal Audit Plan 2010-11 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of Last Follow Up</b>	<b>Number of outstanding recommendations</b>		
Education - Looked After Children	Draft issued						
Section 52	Finalised	14/02/11	Full	Aug 2011	0	0	0
Overpayments	Finalised	21/03/2011	Satisfactory		1	4	1
<b>CHILDREN'S SERVICES</b>							
Child Protection and Reviewing (Safeguarding Children)	Finalised	23/06/11	Satisfactory		3	3	0
Referral and Assessments	Finalised	21/06/11	Satisfactory		0	2	1
Target Youth Support	Finalised	16/06/11	Satisfactory		2	5	3
Children's Centre's – McMillan Early Childhood Centre	Finalised	16/12/2010	Satisfactory		1	3	0
Extended Schools	Finalised	30/11/2010	Satisfactory		1	5	1
<b>ADULT SOCIAL CARE HEALTH &amp; HOUSING</b>							
Equipment and Adaptations (All client groups)	Finalised	14/03/11	Limited	25/8/11	0	0	0
Financial Assessments	Finalised	01/07/2011	Satisfactory		3	0	1
<b>Housing</b>							
Supporting People	Finalised	6/7/11	Satisfactory	Aug 11 – revised date Nov 11	1	0	0
Private Sector Renewal & Disability Grant	Finalised	30/09/10	Limited	Apr 2011 – revised date Nov 2011	1	0	0
<b>Older People's Care</b>							
Residential Contracts	Finalised	20/6/10	Satisfactory	01/08/11	0	0	0

<b>Internal Audit Plan 2010-11 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of Last Follow Up</b>	<b>Number of outstanding recommendations</b>		
Residential to Independent Living	Finalised	27/07/11	Limited		5	9	7
<b>People with Physical and Sensory Disability</b>							
Children with Disabilities - Transition	Draft issued						
<b>Other Adult Services</b>							
Safeguarding Adults	Finalised	18/05/11	Satisfactory	Follow up in progress	0	3	1
<b>ENVIRONMENT AND CONSUMER PROTECTION</b>							
Street Cleaning	Finalised	13/12/10	Satisfactory	May 2011 - revised date Sep 2011	1	2	0
Improvement Projects	Finalised	5/7/2011	Satisfactory		1	5	0
Parking Cash Collection	Finalised	27/06/2011	Satisfactory		1	1	2
Parking Permits (Residents, Visitors & Brown Badges)	Finalised	12/10/10	Limited	April 2011 – revised date Sep11	0	2	0
Stray Dog Service	Finalised	14/09/10	Satisfactory	May 2011 – revised date Sep 2011	0	1	0
<b>PLANNING AND COMMUNITY SERVICES</b>							
<b>Major Construction Projects</b>							
Individual Project Management x 2	Finalised	06/07/11	Limited		3	3	0
<b>Property</b>							

<b>Internal Audit Plan 2010-11 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of Last Follow Up</b>	<b>Number of outstanding recommendations</b>		
Civic Centre Security contract	Finalised	21/09/10	Limited	July 11	0	0	0
Facilities Management Contract	Draft Issued						
<b>Arts, Culture, Libraries &amp; Adult Education</b>							
Adult Education	Finalised	01/07/2011	Satisfactory		0	6	1
Culture and Arts Strategy	Finalised	11/11/10	Satisfactory	May 2011 – revised date Jul 2011	3	1	0
<b>Sport and Leisure</b>							
Fusion Management Contract	Finalised	06/07/11	Limited		5	1	0
<b>Contingency</b>							
<b>Audits</b>							
Investigation 030	Finalised	15/10/10	N/A	Aug 11 – revised date Dec 11	1	2	0
Investigation 031	Completed	N/A	N/A	N/A	0	0	0
Investigation 035	final		N/A		4	2	0
Estate Services Contracts	Finalised	20/06/2011	Full	N/A	0	0	0
Court Costs	Finalised	03/06/11	Limited		4	2	0
Investigation 037	In Progress						
Investigation 038	In Progress						
Investigation 043	In Progress						
Investigation 044	In Progress						
<b>ICT audit contract</b>							
Disposals of ICT Hardware Assets	Completed	Sept 2010	Satisfactory	June 2011	0	0	0
Liquid Logic	Finalised	May 11	Limited		0	6	1

<b>Internal Audit Plan 2010-11 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of Last Follow Up</b>	<b>Number of outstanding recommendations</b>		
Software Licensing	Finalised	Oct 10	Limited	Aug 2011	0	0	0
Oracle Financials- Debtors	Finalised	July 11	Limited		0	3	1
E-Payments	Finalised	April 11	Limited		2	6	3
Information Assurance & Security	Finalised	31/1/11	Satisfactory		0	3	1
<b>Hillingdon Homes Audits by Mazars</b>							
Rent Payments	Finalised	Aug 10	Adequate	Aug 10	0	0	0
Housing – Responsive Repairs	Finalised	Oct 10	Adequate	Aug 10 – revised date Nov 11	1	0	0
Fleet Management	Finalised	Aug 10	Substantive	Aug 10 – revised date Sep 11	0	1	0
Equipment & Adaptations	Finalised	Oct 10	Substantial	Aug 10	0	0	0

<b>Internal Audit Plan 2009-10 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of last Follow up</b>	<b>Number of outstanding recommendations</b>		
<b>CROSS CUTTING CORPORATE ISSUES</b>							
Budgetary Control	Finalised	02/03/10	Satisfactory	May 2011 – revised date Sep 2011	0	3	2
Performance Management	Finalised	29/03/10	Satisfactory	May 2011- revised date Dec 2011	0	1	0
<b>DEPUTY CHIEF EXECUTIVE/FINANCE &amp; RESOURCES</b>							
HR Payroll changes and trigger dates	Finalised	29/6/10	Limited	June 2011	0	0	0
<b>Corporate Property</b>							
Utilities Contracts Gas & Electricity	Finalised	26/03/10	Satisfactory	May 2011 - revised date July 2011	0	1	1
<b>Legal</b>							
Freedom of Information /Data Protection	Finalised	11/06/10	Satisfactory	Aug 2011	0	0	0
Debt Recovery Processes	Finalised	10/5/10	Satisfactory	Jun 2011 – revised Sep 2011	0	3	0
<b>ENVIRONMENT &amp; CONSUMER PROTECTION</b>							
Grounds Maintenance Contracts - Parks and Open spaces	Finalised	23/02/10	Satisfactory	July 2011	0	0	0
Highways Reactive Maintenance	Finalised	7/9/10	Limited	Aug 2011	0	0	0
Highways Planned Maintenance	Finalised	26/01/10	Satisfactory	May 2011 – revised date Mar 2012	0	3	0
Domestic Waste Collection & Disposal –Civic Amenity Sites	Finalised	3/6/10	Limited	May 2011 – Revised date Dec 2011	0	1	0
<b>PLANNING AND COMMUNITY SERVICES</b>							
Business Continuity & Civil Emergency Audit	Finalised	08/06/09.	Limited	June 2011 – revised date July 2011 – Follow up In Progress	1	0	0

Internal Audit Plan 2009-10 Progress							
Audit Title	Status	Date Finalised	Assurance Level	Date of last Follow up	Number of outstanding recommendations		
<b>CHILDREN'S SERVICES</b>							
Asylum Accommodation	Finalised	23/04/10	Satisfactory	Mar 2011 – revised date Oct 2011	0	3	0
<b>Schools - Primary</b>							
Wood End Park	Finalised	11/2/10	Satisfactory	Nov 2010 – revised date Mar 2011	1	0	0
<b>Schools - Secondary</b>							
Ruislip High Secondary School	Finalised	25/03/10	Satisfactory	May 2011 – revised date Dec 2011	1	2	0
<b>Other School Related</b>							
Primary Sickness Scheme	Finalised	29/01/10	Satisfactory	July 2011	0	0	0
Hillingdon Grid for Learning	Finalised	2/12/09	No Assurance	June-2011 – revised date July2011	0	1	0
<b>ASCHH</b>							
<b>Finance systems</b>							
Carefirst Debtors	Finalised	12/2/10	Satisfactory	Jun 2010 – revised date Mar 2011 – Follow up In Progress	1	0	0
<b>Housing</b>							
Temporary Accommodation (formerly B&B)	Finalised	26/08/10	Limited	May 2011 – revised date Sep 2011	1	0	0
<b>Learning Disabilities</b>							
Sec 75 Agreement (Funding of LD Services)	Finalised	6/10/10	Satisfactory	June 2011 – Revised Date Oct. 2011	0	1	0
<b>Mental Health Service</b>							
Mental Health Service	Finalised	29/06/10	Limited	April 2011 - revised date Aug 2011	0	1	0
<b>ICT Contracted Days</b>							

<b>Internal Audit Plan 2009-10 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of last Follow up</b>	<b>Number of outstanding recommendations</b>		
IT Disaster Recovery	Finalised	14/04/10	Limited	August 2011	0	0	0
Environmental Services Application	Finalised	25/08/09	Limited	Closed. System currently being phased out.	0	0	0



<b>Internal Audit Plan 2008-9 Progress</b>							
<b>Audit Title</b>	<b>Status</b>	<b>Date Finalised</b>	<b>Assurance Level</b>	<b>Date of last Follow up</b>	<b>Number of outstanding recommendations</b>		
					H	M	L
<b>IT Audits</b>							
Helpdesk Application	Finalised	05/03/09	Satisfactory	August 2011	0	0	0
Remote Access (ICT)	Finalised	29/7/09	Satisfactory	August 2011	0	0	0
Ocella Application Review	Finalised	Feb 09	Limited	June 2011	0	0	0
IT Data Security and Transfer (from Contingency)	Finalised	26/03/09	Limited	Follow up In Progress	0	1	0
Email Security and Management	Finalised	27/05/09	Limited	August 2011	0	0	0

✓ for Finalised/Satisfactory/Full  
 ⇒ for In Progress  
 ↓ for Limited

Key

Number of outstanding recommendations

Comments

**PLAN 2007-8**

Audit Title	Status	Assurance Level	Number of outstanding recommendations			Comments
			High	Med	Low	
<b>ADULT SOCIAL CARE, HEALTH &amp; HOUSING</b>						
Private Sector Leasing	✓	✓	1	0	0	Followed up May 2011 - Revised date Jul 2011. August 2011 Follow up In Progress.
<b>FINANCE &amp; RESOURCES</b>						
<b>ICT</b>						
Business Continuity Planning	✓	✓	0	0	0	
<b>FINANCE AND RESOURCES</b>						
Securicor Collection	✓	↓	1	0	0	Followed up August 2011 – Revised date for commencement of new contract March/April 2012

