REGISTER OF AUDIT RECOMMENDATIONS - 3 SEPTEMBER 2022

Lead Service	Title	Recommendation	Priority Rating	Original Due Date	Service Comments	Revised Due Date
CEX	Business Continuity Planning and DR (Corporate Review)	CED should review the plans currently in place and, where reliant on third party/supplier input, should ensure that they have been consulted and that the expectations set out in the plans are feasible.	**Medium**	31/12/2018	Agreed with Internal Audit as partially complete. CEX business continuity documents have been updated and continue to be kept under review. Pending finalisation of DR provision (currently subject to contractual negotiations), all materials will be aligned.	**31/12/2022** (31/03/2022) (31/10/2021) (30/06/2021) (31/03/2021) (31/12/2020) (30/04/2020) (29/02/2020) (31/12/2019) (31/08/2019)
CEX	Taxi Usage	The role of the CITU in relation to the ordering of taxis should be reviewed and agreed by FS Management. Thereafter the agreed role should communicated to all relevant staff. Management should ensure that corporate guidance outlining the key requirements in relation to taxi usage is documented and made available to all relevant staff. Services should also ensure that procedures detailing the local process in place for taxi usage are developed and communicated to all relevant staff. In addition, NS and DRS should consider if the process for ordering taxis should be standardised for their Services.	**High**	30/06/2020	Partially complete. The role of the CITU has been reviewed by the Short Life Working Group and is part of the new corporate taxi usage process. The process will be communicated to relevant staff once the remaining back office/ system elements are finalised, delayed during the pandemic due to re-priotisation but now progressing with CGI.	**31/10/2022** (30/04/2022) (31/03/2022) (31/12/2021) (30/04/2021) (28/02/2021) (31/12/2020)
CEX	Taxi Usage	All services should ensure that a complete record of taxi journeys ordered is held. Arrangements should be put in place, e.g. using a risk based sampling approach, to ensure that taxi invoices received are accurate. Services should ensure a process is put in place, or adhered to, to ensure that all taxi journeys are approved accordingly.	**High**	30/06/2020	Partially complete. The new corporate taxi usage process includes record keeping and journey sampling. The process will be communicated to relevant staff once the remaining back office/ system elements are finalised, delayed during the pandemic due to re-priotisation but now progressing with CGI.	**31/10/2022** (30/04/2022) (31/03/2022) (31/12/2021) (30/04/2021) (28/02/2021) (31/12/2020)
CEX	Taxi Usage	Management should review the process in place whereby passwords are used as part of the taxi booking process. Arrangements should be put in place to ensure that staff comply with any mechanisms that are implemented. In the interim, Services should ensure that passwords for taxi accounts are changed immediately to stop unauthorised taxis being ordered. Thereafter, passwords for taxi accounts should be restricted to staff who are responsible for ordering taxis and changed on a regular basis. The CITU should ensure that staff are prompted to provide a password when requesting a taxi. Where the password is not provided, the request should be rejected.	**High**	30/06/2020	Partially complete. Password arrangements have been reviewed by the Short Life Working Group and form part of the new corporate taxi usage process. The process will be communicated to relevant staff once the remaining back office/ system elements are finalised, delayed during the pandemic due to re-priotisation but now progressing with CGI.	**31/10/2022** (30/04/2022) (31/03/2022) (31/12/2021) (30/04/2021) (28/02/2021) (31/12/2020)

CEX	Taxi Usage	Services should ensure that the agreed taxi ranking is adhered to where possible. Services should ensure that the review of taxi invoices includes confirming that the rates being charged are in line with the agreed pricing schedule. Any discrepancies should be raised with the taxi companies as soon as possible and disputes escalated where required.	**High**	30/06/2020	Taxi ranking has forms part of the new corporate taxi usage process that has been finalised by the Short Life Working Group. The process will be communicated to relevant staff once the remaining back office/ system elements are finalised, delayed during the pandemic due to re-priotisation but now progresisng with CGI.	**31/10/2022** (30/04/2022) (31/03/2022) (31/12/2021) (30/04/2021) (28/02/2021) (31/12/2020)
CEX	GLAMIS - Application Audit	Management should ensure regular reconciliations between stationary used and licences issued	**Medium**	30/04/2021	The Licensing team have undertaken initial conversations with GLAMIS suppliers to gain a fuller understanding of the implications of implementing this recommendation. The supplier has indicated that there will be a cost associated with the changes that may be required to meeting the resolution of the recommendations as noted. Licensing Team are continuing to work with the supplier to understand the scale of this cost and potential wider implications of best value for the Council, including consideration being given to the wider IT Development pipeline which includes a new system for licensing who will be given three options of preferred suppliers at the end of September 2022. Progress will be prioritised to support the implementation of the second part of this this recommendation, the rational for this being – Every action on GLAMIS is recorded for auditing purposes, all officers are trained to use the system to the level to which they are required to do so and any use of the system out with the management permissions that have been given will be recorded in the system. As such relevant training for key managers / supervisors will be investigated to support production and review of bespoke reporting from the system.	**31/03/2023** (31/03/2022) (31/01/2022) (31/10/2021)

CEX	GLAMIS - Application Audit	Management should engage with the system suppliers to request segregation of access between system administrators and standard system users. Where this is not possible management should use reporting to verify system administrator tasks.	**Medium**	31/07/2021	At this time the licensing team has limited resource capacity and is under time pressure to maintain its day to day renewal and processing of license applications. This day to day work which, is critical to allow Glasgow businesses to operate and generation of income for the Council, must be prioritised especially given there remains a backlog of work, some of which is related to the latter part of the pandemic. As such a request to extend the timeline for this recommendation to 31 03 2023 is requested. This extension will allow licensing to catch-up on its existing workload and review resourcing where possible.	**31/03/2023** (31/03/2022) (31/10/2021)
CEX	IT Refresh - Device Security Controls	SIT and CGI must agree an appropriate recovery process for legacy devices so that these can be retrieved from users. The detailed process should consider: - The scope of the recovery exercise. - The responsibilities of those involved. - The methods of collection. - The target timeframe. - Repurpose and disposal arrangements.	**Medium**	31/08/2021	Agreed with Internal Audit as partially complete. Device recovery is progressing and a series of communications have been issued in support of the process. Recovery from Education and libraries establishments is complete. Completion of recovery across the corporate estate is dependant on a number of factors, including capacity of the refurbishment contractor to uplift devices and completion of the End User Compute programme, which is being progressed by CGI. In the meantime, recoveries continue where possible. The equipment is encrypted and does not pose an Information Security risk.	**31/12/2022** (31/03/2022) (31/02/2021)
CEX	Performance Management	Management in the relevant services should ensure that, where considered appropriate, performance figures being reported are subject to review and approval by a secondary officer prior to inclusion in performance reports. An audit trail of the approval should be retained in order to demonstrate this. Management in the relevant services should review arrangements that are in place for the collection, collation and calculation of performance indicator information and statistical returns to ensure that arrangements are robust, and data reported is accurate.	**Medium**	30/09/2021	A revised implementation date required to incorporate new Strategic Plan Performance framework; and the development of a Performance Manual. This is to allow the lead service (CED) and the Strategic Performance Working Group to develop and implement a revised performance management framework which will include the guidance noted above in relation to this process.	**31/12/2022** (30/06/2022)

CEX	Corporate Resilience Arrangements	The Resilience Unit should explore options across the Council to help ensure sufficient coverage is available to fulfil the Council Incident Officer role.	**Medium**	02/11/2021	A review of the "Out of Hours" Council Incident Officer response arrangements are required to ensure a more robust and sustainable model is put in place. To this end, positive dialogue has taken place with key service departments (HSCP/NRS/CED) to explore how an all council approach can support this going forward. A paper has now been submitted to the Council's Head of H.R. identifying three options for consideration. It is the intention to present this to the Chief Executive and Service Directorate during September. Thereafter a proposal will be agreed, which will meet the needs of the council over the medium and longer term. It is anticipated that a working model will be fully embedded and operational in November 2022.	**30/11/2022** (31/03/2022)
CEX	Performance Management	CED Management should review the current arrangements in place to ensure that performance information being reported is subject to regular review and update and remains fit for purpose. Any required amendments should then be formally implemented and communicated to the relevant officers. Service Management should also ensure that formal approval of the suite of key performance indicators can be demonstrated.	**Medium**	28/02/2022	A revised implementation date required to incorporate new Strategic Plan Performance framework; and the development of a Performance Manual. This is to allow the lead service (CED) and the Strategic Performance Working Group to develop and implement a revised performance management framework which will include the guidance noted above in relation to this process.	**31/12/2022** (30/06/2022)
CEX	Performance Management	CED and FS Management should ensure that the target setting process drive improvements in service performance. Where future targets being set are at a level below the performance achieved in previous years, management should ensure that robust record keeping is in place to demonstrate the reasons for this. NRS management should ensure that a clear audit trail of decisions made in relation to targets is maintained.	**Medium**	28/02/2022	A revised implementation date required to incorporate new Strategic Plan Performance framework; and the development of a Performance Manual. This is to allow the lead service (CED) and the Strategic Performance Working Group to develop and implement a revised performance management framework which will include the guidance noted above in relation to this process.	**31/12/2022** (30/06/2022)
CEX	Performance Management	Management from all services should review the current suite of key performance indicators to determine where documented procedures or process notes are required. Following review, management from all services should ensure that procedure notes are developed for all areas where this has been identified as being appropriate.	**Medium**	28/02/2022	A revised implementation date required to incorporate new Strategic Plan Performance framework; and the development of a Performance Manual. This is to allow the lead service (CED) and the Strategic Performance Working Group to develop and implement a revised performance management framework which will include the guidance noted above in relation to this process.	**31/12/2022** (30/06/2022)

CEX	Performance Management	Management within FS, NRS, and CED should ensure that source data and other evidence necessary to support the calculation of performance measures is retained in support of the figures being reported	**Medium**	28/02/2022	A revised implementation date required to incorporate new Strategic Plan Performance framework; and the development of a Performance Manual. This is to allow the lead service (CED) and the Strategic Performance Working Group to develop and implement a revised performance management framework which will include the guidance noted above in relation to this process.	**31/12/2022** (30/06/2022)
CEX	Performance Management	Where the results of an indicator may change as a result of timing issues, the service should consider adding a caveat to reported information to make it clear that the data may be subject to change. Management should also consider whether it is appropriate to update prior year figures in performance monitoring reports to reflect known changes that arise as a result of timing difference	**Low**	28/02/2022	A revised implementation date required to incorporate new Strategic Plan Performance framework; and the development of a Performance Manual. This is to allow the lead service (CED) and the Strategic Performance Working Group to develop and implement a revised performance management framework which will include the guidance noted above in relation to this process.	**31/12/2022** (30/06/2022)
CEX	IT Assurance	CGI and SIIT need to finalise their proposed ICT and cyber security remediation action plan and ensure rapid implementation. Where risks are not able to be mitigated within a 1-2 month time frame, there needs to be a clear risk acceptance process to ensure that GCC management are fully aware of the current security posture and potential impact. Both parties need to ensure that actions to address these risks are not unduly delayed by contractual disputes	**High**	28/02/2022	Agreed with Internal Audit as partially complete. The Security Action Plan has been finalised although progress has not been as swift as expected. This has been escalated through the ICT governance structures, resulting in additional senior management focus within CGI. An update was provided to FASC members on 30 August 2022.	31/12/2022
CEX	SIT Structure and Resources	SIIT management should review the governance structures in place and ensure that a clear set of criteria have been defined for the escalation of project issues. These should be communicated to board members as necessary, to ensure that projects are effectively managed.	**Medium**	31/03/2022	Agreed with Internal Audit as partially complete. The ICT Governance Framework has been refreshed and implemented. Documemted escalation criteria is being finalised and due for completion by 16 September 2022.	30/09/2022

CEX	IT Assurance	It is recognised that CGI and Council Management have recently taken steps to prioritise critical ongoing issues and unblock key projects. The HANYA review also offers more sustainable structural changes to embed a better way of working between the Council and its ICT contractor. It is crucial that this momentum is maintained by management within GCC and CGI. The priority areas identified by GCC should be formally set out and approved by relevant GCC Senior Officers, as should any changes to this priority list. Where issues or blockages are not being quickly resolved by the new approaches outlined above, these should be immediately escalated to GCC Senior Officers for raising with CGI UK management. GCC Senior Officers should also closely monitor any anticipated contractual disputes with CGI to ensure a coordinated approach is taken in order to protect the GCC commercial position	**High**	31/03/2022	Agreed with Internal Audit as partially complete. Parts (a) and (c) are complete as significant progress has been made to deliver the Hanya Mid-Term Review and maintain the momentum and anticipate and manage potential contractual disputes. In terms of part (b), the recommendation relates to priority areas identified and managed throughout Hanya, which have been confirmed with ongoing management arrangements. There is a wider more complex corporate exercise required, linked to the Future of ICT project, for the Council to confirm it's priorities and this is being progressed by SIIT management separately.	31/12/2022
CEX	Covid Additional Funding Review	Management must ensure that where payments are made via OTV, independent verification of bank details is undertaken and recorded. This is a requirement of the Council's corporate OTV procedure.	**High**	07/05/2022	CEX has advised that recommendation has been implemented, but evidence requries to be submitted to Internal Audit.	30/09/2022
CEX	Covid Additional Funding Review	Management must develop and formalise a control framework to be used only in emergency or timepressured instances which allows flexibility, judgement and a risk based approach when allocating funding under such circumstances. This must maintain a level of governance and control to ensure the funds are used appropriately and fairly. Key areas to include: • When to utilise the emergency funding framework; • Identification and vetting of third party funding recipients; • Authorisation requirements within the Scheme of Delegation; • Formalised terms and conditions of funding; and • Post award monitoring.	**High**	13/05/2022	Partially complete. Process map has been developed and communicated to staff. Work ongoing to agree changes to the Scheme of Delegation.	31/12/2022

CEX	Complaints Handling	The Customer Care Manager must communicate to all services the need to regularly review and monitor compliance with the CHP. This should include service level spot-checking of a proportion of complaints received by each service area. Where any anomalies or areas of non-compliance are identified, these should be fully investigated, with action taken to address the root cause and prevent reoccurrence. Additional support should be offered to staff where training needs are identified. The CHF should also consider whether there is a possibility of introducing customer feedback surveys as a means to identify and assess potential process improvements.	**High**	31/05/2022	Management have been unable to implement recommendation due to resourcing issues.	30/11/2022
CEX	CComplaints Handling	The Customer Care Manager should liaise with service management to reiterate the importance of fully resolving complaints and reflecting the outcomes in Lagan. Thereafter, complaint managers in each service should ensure that any unresolved or outstanding complaints are fully investigated and closed on Lagan, where it is appropriate to do so.	**Medium**	31/05/2022	Management have been unable to implement recommendation due to resourcing issues.	30/11/2022
CEX	Complaints Handling	The Customer Care Manager should develop a process to produce regular complaint reports and communicate these to service management teams. These reports may include information pertaining to: • Outstanding or unresolved complaints. • Key performance indicators and other statistics. • Information on key/significant complaint issues. • Analysis of trends in complaints, including the reason for complaints and potential service improvements. These reports should then be monitored and reviewed by service senior management on a regular basis. Where any issues or anomalies are identified, such as unresolved and outstanding complaints, timely corrective action should be taken to resolve this.	**Medium**	31/05/2022	Management have been unable to implement recommendation due to resourcing issues.	30/11/2022
CEX	Complaints Handling	The Customer Care Manager should communicate to all services the requirement to log all complaints, including those received locally, in Lagan. CED, FS and NRS management should also consider adopting a consistent mechanism across all services to ensure that all complaints received directly by the service are logged.	**Medium**	31/05/2022	Management have been unable to implement recommendation due to resourcing issues.	30/11/2022

CEX	Complaints Handling	CED management should review the current suite of CCT procedure documents to ensure that they are up to date, aligned with the updated CHP, and reflective of the current operational structure of the Council. Thereafter, a process should be put in place to ensure that they are reviewed on a periodic basis and accurately reflect current practices.	**Medium**	31/05/2022	Management have been unable to implement recommendation due to resourcing issues.	30/11/2022
CEX	Phishing Resilience	While communications are issued to employees with the #SafeGlasgow branding, staff should be reminded of the information and guidance contained within the #SafeGlasgow intranet pages (including the phishing reporting processes) and where these can be located. While the Council has guidance regarding non-email phishing vectors this should be reviewed to see if this can be enhanced as most of the employee interviewed were less confident of how to identify these types of phishing attempts. The Council should implement tools to evaluate employee awareness of information security risks, including phishing; this may include the phishing simulation exercises currently being explored. Additionally, consideration should be given to technological controls that would mitigate a phishing attack.	**Medium**	30/06/2022	Agreed with internal Audit as partially complete. Two all-Council security messages have been issued since the audit, as well as being addressed in the 2022 Information Security course. Consideration of evaluation tools is ongoing and technical discussions with CGI about technological controls have been hampered by changes in CGI personnel.	31/12/2022
CEX	Phishing Resilience	The ISB should review the function and purpose of the integrity mailbox, considering the resourcing requirements. If necessary, an alternative approach for providing advice to employees and allowing attempts to be reported should be explored. Additionally, procedures should be developed for communicating information and the potential impact with relevant third parties, following breaches within GCC. Once developed these should be included for review in the ISB Policy and Guidance sub-group's work plan.	**Medium**	30/06/2022	Technical discussions with CGI have been hampered by changes in CGI personnel.	31/12/2022

CEX	Complaints Handling	The CED Business Partner should liaise with the Strategic Innovation and Technology Team to consider whether the plans to procure or develop a new system can be revisited and expedited, or whether an alternative replacement system can be sourced. A risk assessment should also be conducted to identify and document any risks arising from the lack of system support and maintenance. Where risks are identified, appropriate mitigating actions should be put in place to manage these. The Customer Care Manager should ensure that, in the interim period, a manual workaround is put in place to ensure that performance data is calculated accurately for reporting purposes.	**High**	30/06/2022	Management have been unable to implement recommendation due to resourcing issues.	30/11/2022
CEX	Complaints Handling	The Customer Care Manager should ensure that a GOLD course is developed which is reflective of the updated CHP and which clearly explains the processes to be followed by staff with responsibilities for handling complaints. Thereafter, all relevant staff who are likely to deal with customer complaints should be required to complete the course.	**Medium**	30/06/2022	CEX advised that they has met with Organisational Development and the scope of the course has been agreed. The course will follow the general direction of the GL course, with some slight differences. This will be complete by 31 October 2022, thus have revised the implementation date to then.	31/10/2022
CEX	Phishing Resilience	Information security training and recording for Elected Members should be reviewed to understand and address the reasons behind the low level of completion recorded. The Council's training and guidance regarding phishing should be updated to include the risks from opening attachments and macro enabled Microsoft Office documents. The Elected Members guidance should also be updated to reflect the current reporting procedures for phishing.	**Medium**	30/07/2022	SIIT has confirmed that this is complete, pending submision of evidence for Internal Audit confirmation	30/09/2022
CEX	Glasgow Communities Fund	For future grant programmes, management should review the documented procedures to agree what supporting evidence should be accepted in support of grant applications. Once updated, assessing officers should ensure that supporting evidence accepted for verification purposes is in line with the agreed documented procedures in place.	**Medium**	01/08/2022	Grants Team has confirmed this is in progress following discussion at CAC. They hope to have final updates in January 2023. Request revised due date of 31 January 2023.	31/01/2023
CEX	Glasgow Communities Fund	For future grant programmes, management should ensure that the audit trail is enhanced to demonstrate the full decision making process for both the final decision outcome and the amount to be awarded. Management should review the arrangements in place for the shortlisting of recommended applicants.	**High**	31/08/2022	Grants Team has confirmed this is in progress following discussion at CAC. They hope to have final updates in January 2023. Request revised due date of 31 January 2023.	31/08/2023

CEX	Procurement - Non-contract spend	A reminder of the OTV process should be issued to all Service representatives, highlighting that this should not be used to evade procurement requirements.	**Medium**	31/08/2022	A reminder of the OTV processes has not been issued to CEX service representatives at this time. This is planned to be issued via JSMT for dissemination to managers in October 2022 when the next quarterly governance report goes to CEX SMT. Therefore an extension to end 31 December 2022 is requested to allow for dissemination throughout the service.	31/12/2022
CEX	Project Impact Management	The Chief Executive's Department should ensure that the DWB Risk Register is updated so that risks are suitably detailed and the Register complies with the requirements of the Corporate Risk Management Policy and Framework.	**Medium**	31/08/2022	CEX has confirmed that this is complete, pending submision of evidence for Internal Audit confirmation	30/09/2022
ES	Establishment Visits	Services should ensure that staff are completing the core courses for health and safety as noted in the service management standards. Furthermore statistics of the completion of the courses should be reported and monitored.	**Low**	30/11/2019	Representatives from ES met with IA to explain situation and progress. A revised completion date of 31 December was agreed. As explained previously, the recording of all training across the council is currently being investigated by Corporate H & S to determine a suitable training recording system for all staff, which provides continuity across all council services. Meanwhile, in the absence of a corporate solution, ES H&S are utilising ES CPD Manager Training System to ensure the recording and monitoring of current/ongoing ES H & S training whilst investigating a solution to identify those who have not completed the appropriate courses. This has been progressed and ES are exploring the potential of using the existing support within ES to monitor and contact recently appointed Heads of Establishment who have not attended the mandatory H & S training. However, this is in conjunction with teams in ES and details have yet to be clarified and agreed.	**31/12/2022** (30/06/2022) (31/12/2021) (30/06/2021) (30/04/2021) (28/02/2021) (31/12/2020) (01/06/2020) (31/11/2019)

ES	School Lets	All parties involved in the School Lets function must review the entire process to determine if changes are required to the current arrangements.	**Medium**	31/01/2020	The Management Circular was completed but not published due to the COVID restrictins in shools at the time. Since then, the opportunity arose to further review a number of legacy processes and arrangements that no longer fit the current school structure. A development plan is being finalised to make recommendations on the following areas: •Primary school letting patterns •Common charging for schools •Cleaning regimes following a let •Continued use of OOSC groups operating breakfast clubs •Review of pricing structure taking into account pricing structures in Glasgow Life run football pitches. Can cause confusion for the local communities •Review of floodlighting costs Other smaller changes including the name of the Community Letting Team to School Letting. Change to be made throughout the document. Revised date agreed by IA	**30/09/2022** (30/06/2022) (30/09/2021) (30/04/2021) (31/03/2021) (31/01/2021) (31/10/2020) (31/03/2020)

ES	Governance Review	EDS should ensure that all staff with Business Continuity responsibilities undertake the mandatory BCM training. More widely EDS should liaise with the relevant teams to ensure that suitable outcomes are delivered as part of the ongoing training review. Thereafter the revised monitoring and reporting processes should be applied to all mandatory training courses.	**Medium**	30/06/2020	Representatives from ES met with IA to explain situation and progress. A revised completion date of 31 December was agreed. As explained previously, the recording of all training across the council is currently being investigated by Corporate H & S to determine a suitable training recording system for all staff, which provides continuity across all council services. Meanwhile, in the absence of a corporate solution, ES H&S are utilising ES CPD Manager Training System to ensure the recording and monitoring of current/ongoing ES H & S training whilst investigating a solution to identify those who have not completed the appropriate courses. This has been progressed and ES are exploring the potential of using the existing support within ES to monitor and contact recently appointed Heads of Establishment who have not attended the mandatory H & S training. However, this is in conjunction with teams in ES and details have yet to be clarified and agreed.	**31/12/2022** (30/06/2022) (31/12/2021) (30/06/2021) (31/15/2021) (29/02/2021) (31/10/2020)
ES	Performance Management	CED management should ensure that where services continue be delivered that there are measures put in place to ensure that performance data is collected and reported despite disruption to services. Arrangements should be put in place to ensure that performance monitoring reports continue to be regularly presented for scrutiny to the SMT. CED, NRS and EDS management should ensure that proposed remedial actions identified to address performance concerns are formally documented and logged, including the officers responsible for implementation of the actions. Thereafter, progress towards implementation of the agreed actions should be monitored by management on a regular basis.	**Medium**	31/08/2021	Education Services are currently undertaking a review of our current performance reporting and management procedures in collaboration with our new Executive Director and Heads of Service. This include looking at new approaches to target setting and management, performance reporting and also management of our performance framework and approval procedures. To allow us to take a comprehensive and thorough approach to this review we would ask for an extension until December 2002 where we will be in a better position to provide an update	**31/12/2022** (30/06/2022) (31/03/2022)
ES	Performance Management	CED Management should review the current arrangements in place to ensure that performance information being reported is subject to regular review and update and remains fit for purpose. Any required amendments should then be formally implemented and communicated to the relevant officers. Service Management should also ensure that formal approval of the suite of key performance indicators can be demonstrated.	**Medium**	28/02/2022	Arrangements now in place to ensure that all KPI's have sign off at Directorate as ay July 22. Recent examples of KPI's to go include Corporate Score Card, End of Year Reports and ACEL. As the demands on the service change so do the suite of KPI's. This is Directed by the Strategic Support Services Manager within Education.	30/09/2022

ES	Performance Management	Management in the relevant services should ensure that, where considered appropriate, performance figures being reported are subject to review and approval by a secondary officer prior to inclusion in performance reports. An audit trail of the approval should be retained in order to demonstrate this. Management in the relevant services should review arrangements that are in place for the collection, collation and calculation of performance indicator information and statistical returns to ensure that arrangements are robust, and data reported is accurate.	**Medium**	28/02/2022	These were reviewed as at August 22. However, it needs to be noted that this will be subject to further review as indicators around the 22 Council Plan and annual NIF report etc. are developed.	30/09/2022
ES	Procurement - Non-contract Spend	Council Services should be reminded of the requirement to engage with the SOAR process and work with the CPU to reduce and address non-contract spend.	**Medium**	31/08/2022	Meetings are arranged with CPU and ES to discuss SOAR reports. 2 recent meetings were held on 25 and 29 August 2022. Notes of meeting have been requested.	30/09/2022
FS	Parking Vouchers	A reconciliation process must be introduced to ensure all income received from vouchers is accounted for and any variances identified are actioned.	**High**	31/03/2019	Following a further review, FS Governance has been working closely with CBS to develop the reconciliation that was put in place following Pay360 implementation in Jan 2022. Final changes have been requested, thereafter the reconciliation will be submitted to Internal Audit.	**31/10/2022** (31/08/2022) (30/04/2022) (28/02/2022) (31/10/2021) (30/06/2021) (30/04/2021) (31/12/2020) (29/02/2020) (31/07/2019) (30/06/2019)
FS	School Lets	All parties involved in the School Lets function must review the entire process to determine if changes are required to the current arrangements.	**Medium**	31/03/2020	An extension of Sept 22 was agreed with ES by Internal Audit. Therefore, to link with this, a revised date of 30/09/22 has also been agreed for FS. The recommendation relates to more than one service area/ALEO	**30/09/2022** (31/03/2022) (31/10/2021) (31/05/2021) (31/12/2020) (31/10/2020)

FS	CBS Work for Other Organisations	Senior management should ensure that appropriate documented agreements are finalised and put in place for all services provided to external organisations to ensure the roles, responsibilities and deliverables of each party are documented and agreed.	**Medium**	30/06/2021	CBS have or are due to meet local authority partners for which they manage the collection of parking fines. Discussions have identified that the parking landscape has changed. This, and other factors such as the council's relationship with CGI, were not included in the original documents. As a result there is a need to review the existing Collaboration Agreements and data sharing arrangements to ensure they remain fit for purpose and the costs associated with the ongoing service are appropriate. Activity is underway to agree the content, however due to a requirement for legal consultation on both sides to conclude arrangements it is now anticipated the updated agreements will be signed by the end of December 2022	**31/12/2022** (31/03/2022) (30/09/2021)
FS	CBS Work for Other Organisations	Senior management should review fees charged to ensure these meet current costs, and this review should be undertaken on a regular basis. A record to support decisions on price changes should also be maintained.	**Medium**	30/06/2021	CBS have or are due to meet local authority partners for which they manage the collection of parking fines. Discussions have identified that the parking landscape has changed. This, and other factors such as the council's relationship with CGI, were not included in the original documents. As a result there is a need to review the existing Collaboration Agreements and data sharing arrangements to ensure they remain fit for purpose and the costs associated with the ongoing service are appropriate. Activity is underway to agree the content, however due to a requirement for legal consultation on both sides to conclude arrangements it is now anticipated the updated agreements will be signed by the end of December 2022	**31/12/2022** (31/03/2022) (30/09/2021)
FS	CBS Work for Other Organisations	Senior management should liaise with the partner organisations to ensure that where applicable, data sharing agreements are in place and signed by all parties for services where data is transmitted between CBS and other organisations to whom it provides services. CBS management should consider the most appropriate method for transmitting files to external organisations which contain personal or sensitive data, e.g. an approved file sharing website or solution such as Objective Connect.	**High**	30/06/2021	CBS have or are due to meet local authority partners for which they manage the collection of parking fines. Discussions have identified that the parking landscape has changed. This, and other factors such as the council's relationship with CGI, were not included in the original documents. As a result there is a need to review the existing Collaboration Agreements and data sharing arrangements to ensure they remain fit for purpose and the costs associated with the ongoing service are appropriate. Activity is underway to agree the content, however due to a requirement for legal consultation on both sides to conclude arrangements it is now anticipated the updated agreements will be signed by the end of December 2022	**31/12/2022** (30/09/2022) (31/03/2022) (30/09/2021)

FS	Income Management System Implementation	The project team should review the business case at key stages throughout the project and update it as appropriate to incorporate any material changing circumstances or requirements	**Low**	31/10/2021	It is anticipated there will be no new developments beyond the original scope for the remainder of 2022. New projects will require a business case, but this will not be until the new year.	**23/01/2023** (31/10/2022)
FS	Income Management System Implementation	The project team should liaise with all business areas using Pay 360 to ensure that appropriate reconciliations are being performed between the system, line of business system, bank account and financial ledger.	**Medium**	31/10/2021	Evidence has been provided to Internal Audit for those reconciliations now in place, however two remain outstanding. These are being followed up with the responsible officers	**30/09/2022** (31/03/2022)
FS	Performance Management	CED and FS Management should ensure that the target setting process drive improvements in service performance. Where future targets being set are at a level below the performance achieved in previous years, management should ensure that robust record keeping is in place to demonstrate the reasons for this. NRS management should ensure that a clear audit trail of decisions made in relation to targets is maintained	**Medium**	28/02/2022	Interim guidance has been issued to FS management, however the outcomes from the review of the Corporate Performance Management Framework are awaited and will be adopted by the service thereafter.	31/12/2022
FS	Performance Management	Management from all services should review the current suite of key performance indicators to determine where documented procedures or process notes are required. Following review, management from all services should ensure that procedure notes are developed for all areas where this has been identified as being appropriate.	**Medium**	28/02/2022	Interim guidance has been issued to FS management, however the outcomes from the review of the Corporate Performance Management Framework are awaited and will be adopted by the service thereafter.	31/12/2022
FS	Performance Management	Management within FS, NRS, and CED should ensure that source data and other evidence necessary to support the calculation of performance measures is retained in support of the figures being reported	**Medium**	28/02/2022	Interim guidance has been issued to FS management, however the outcomes from the review of the Corporate Performance Management Framework are awaited and will be adopted by the service thereafter.	31/12/2022
FS	Performance Management	Management in the relevant services should ensure that, where considered appropriate, performance figures being reported are subject to review and approval by a secondary officer prior to inclusion in performance reports. An audit trail of the approval should be retained in order to demonstrate this. Management in the relevant services should review arrangements that are in place for the collection, collation and calculation of performance indicator information and statistical returns to ensure that arrangements are robust, and data reported is accurate.	**Medium**	28/02/2022	Interim guidance has been issued to FS management, however the outcomes from the review of the Corporate Performance Management Framework are awaited and will be adopted by the service thereafter.	31/12/2022

FS	Performance Management	Where the results of an indicator may change as a result of timing issues, the service should consider adding a caveat to reported information to make it clear that the data may be subject to change. Management should also consider whether it is appropriate to update prior year figures in performance monitoring reports to reflect known changes that arise as a result of timing differences.	**Low**	28/02/2022	This will be adopted for the 2022/23 ASPIR and other reports as required	31/10/2022
FS	Non-Domestic Rates & Council Tax Changes	Management should ensure that all future user acceptance testing scripts are fully completed. To facilitate this, completed testing scripts should be subject to review and sign off by a second officer prior to the formal implementation of the updates on the live system.	**Medium**	30/06/2022	Evidence provided for a patch that was implemented in July but the next known Academy release is not until December 2022	31/01/2023
FS	Procurement - Non-contract Spend	Council Services should be reminded of the requirement to engage with the SOAR process and work with the CPU to reduce and address non-contract spend.	**Medium**	30/06/2022	The Q1 SOAR was received 5/8/22. Evidence of review by FS will be provided to Internal Audit once submitted to CPU	30/09/2022
FS	Complaint Handling	The Customer Care Manager must communicate to all services the need to regularly review and monitor compliance with the CHP. This should include service level spot-checking of a proportion of complaints received by each service area. Where any anomalies or areas of non-compliance are identified, these should be fully investigated, with action taken to address the root cause and prevent reoccurrence. Additional support should be offered to staff where training needs are identified. The CHF should also consider whether there is a possibility of introducing customer feedback surveys as a means to identify and assess potential process improvements.	**High**	30/06/2022	No update received as yet from Chief Executive's Department who are leading on the audit recommendations	31/08/2022
FS	Complaint Handling	The Customer Care Manager should liaise with service management to reiterate the importance of fully resolving complaints and reflecting the outcomes in Lagan. Thereafter, complaint managers in each service should ensure that any unresolved or outstanding complaints are fully investigated and closed on Lagan, where it is appropriate to do so.	**Medium**	30/06/2022	No update received as yet from Chief Executive's Department who are leading on the audit recommendations	31/08/2022
FS	Blue Badges & Education Benefits	Management should ensure that payments processed through the financial ledger are periodically reconciled to approved clothing grant applications on SEEMiS. Management should ensure that, in future years, the automatic payment run processed through the ledger can be reconciled to the cases identified in the source data report.	**High**	30/06/2022	Evidence expected to be available and submitted to Internal Audit early Sept.	30/09/2022

NRS	Maintenance of Vehicles	Following the upgrading of the Servitor system, LES should produce, monitor, measure and report appropriate Key Performance Indicators.	**Medium**	30/04/2017	The programme to develop and deliver the Tranman fleet management system remains ongoing with CGI and Civica still working to develop the system to meet GCC requirements. The most recent go live date is the end of August however, programme progress has been assessed as "Red" due to programme slippages and development work still required. As a result it is anticipated that the full system go live date is likely to be later in the calendar year. With that in mind a request for consideration to be given to a further extension until the end of the year was passed to Internal Audit, this was subsequently approved.	**30/12/2022** (31/07/2022) (28/02/2022) (01/09/2021) (01/02/2021) (31/03/2020)
NRS	Developer Contributions	DRS must ensure that the use of BBC CGA funds is embedded within the remit of Property and Land Services. Any decisions on the use of these funds should include the involvement of appropriate senior officers, and ensure that: The requirement for these facilities is assessed; Construction of facilities is subject to a comprehensive costing exercise; Revenue implications are taken into account; Any decisions to defray developer contributions are subject to documented approval by an appropriate senior officer or committee.	**Medium**	30/09/2019	A report has been scheduled for presentation at CAC. Planning will expedite the defrayment (accepting land in lieu of payment) under City Development Plan Guidelines. A request to move the implementation date to 30/09/2022 to allow for this was sent to Internal Audit and was subsequently approved .	**30/09/2022** (31/03/2022) (30/06/2021) (31/12/2020)
NRS	Alarms Framework	PLS must work with relevant stakeholders to ensure that the new contractual arrangements include a schedule of rates for each provider which covers the majority of the most common equipment which is likely to be ordered for the Council family estate over the course of that contract.	**High**	31/10/2019	Process is ongoing, the implementation team have advised that they should have the Dynamic Purchasing System (DPS) published, evaluated and awarded by the end of August, with a view to the first tenders (to include comprehensive SORs) published in September and awarded in December. Senior management and Audit are meeting on a regular basis and are updated on all progress. In order to accommodate this timescale a request to extend the implementation date to January 2023 was submitted to Internal Audit and subsequently approved. However, due to a number of challenges encountered with this project, there is potential that a further extension may be required.	**30/01/2023** (30/04/2022) (31/10/2021) (31/05/2021) (29/02/2020)

NRS	Review of Fuel Management	Depot Managers should carry out a sample check on transactions to ensure these can be traced back to paperwork. A review to identify and investigate any incorrect or no odometer readings should also be carried out. Checks should be carried out centrally to ensure that this process is being adhered to.	**High**	31/12/2019	Following the recent completion of the roll out of the new fuel management system, it was deemed necessary for an update to the Work Instruction, together with some further guidance for managers on completing required sample checks should be issued, this is currently underway. Once this has been completed and the Work Instruction issued, a further compliance check will be undertaken with the outcome reported to Internal Audit.	**30/09/2022** (31/03/2022) (31/10/2021) (31/05/2021) (31/03/2021) (30/09/2020) (31/08/2020)
NRS	Governance Review	DRS should document all key delivery partners and ensure that formally documented agreements are in place.	**Medium**	31/07/2020	Progress is ongoing, with a plan of action has been drawn up to ensure that partnership list(s) are current and updated when necessary, and that it is recorded how and where agreements are stored and retrieved, with some evidence having been submitted to Internal Audit. Arrangements are currently being made to ensure that all the relevant partnership documentation is placed in a central repository and a final list compiled and reviewed.	**31/08/2022** (31/03/2022) (31/01/2022) (30/09/2021) (01/05/2021) (31/03/2021) (31/01/2021) (30/11/2020)
NRS	NS Utilities Management	The roles and responsibilities for utilities across the Council must be formalised and agreed by all parties involved. Documented operational procedures for the tasks involved in managing utilities should be produced, and made available to all relevant employees.	**High**	31/12/2020	The intention is that a report will be taken to the Climate and Sustainability Board on the 16/09/2022 proposing a new approach to management of utilities. Providing agreement is reached at the board, an action plan will then be developed to manage the transition to the new approach. To allow time for this to progress as planned, a further extension to 30/11/2022 has been requested.	**30/11/2022** (31/03/2022) (31/12/2021) (30/06/2021) (28/02/2021)
NRS	DRS Utilities Management	Management should review the Carbon Management Query Tracker to identify long standing and / or costly issues which have yet to be addressed and update the log and arrange remedial action where necessary. Management should consider the introduction of priorities and associated target dates for conclusion, and measure performance against these. Consideration should be given to a more strategic approach, including addressing consumption at the highest consuming sites. Additionally areas of good practice which are identified through monitoring should be replicated across the estate.	**Medium**	28/02/2021	Work to implement this recommendation has been progressing, although significantly delayed due to council reorganisation, subsequent changes to the structure within NRS and recent staff departures. Recruitment of staff to fill vacancies is well-advanced with interviews currently being conducted. Following a re-assessment by Senior Management a series of extensions have been requested, the most recent being to 30/09/2022.	**30/09/2022** (31/03/2022) (30/09/2021) (30/04/2021)

NRS	DRS Utilities Management	The basis of apportioning and allocating utility costs across Services should be reviewed to find a more equitable and representative method which also incentivises Services to reduce consumption.	**High**	01/04/2021	Work to investigate the possibility of agreeing annual energy budgets for services with relevant apportioning in an effort to encourage service level responsibility for energy consumption has been ongoing. Progress has been significantly delayed due to service reorganisation, subsequent changes to the structure within NRS and recent staff departures. Recruitment of staff to fill vacancies is well-advanced.	**30/09/2022** (31/03/2022) (30/09/2021) (30/04/2021)
NRS	NS Utilities Management	The CPU, in conjunction with NS, should seek to understand reasons for this 2015 procurement exercise not being completed and take measures to ensure this does not happen in future. An appropriate regulated procurement exercise for the bill validation requirements should be undertaken, culminating in a formal contractual agreement. The CPU and NS should undertake a targeted review to provide assurance that there are no other areas of spend in a similar situation.	**High**	01/04/2021	NRS continues to engage with CPU to allow a procurement exercise to be undertaken. Every effort is being made to expedite this process. NRS continue to look to appoint a supplier at the earliest opportunity. Efforts have been made to identify a suitable Framework to enable procurement of the service but unfortunately none have been identified, resulting in the need to proceed with a conventional ITT. In order to allow time for this to progress, a further extension to the implementation date until 30/11/2022 has been requested.	**30/11/2022** (31/03/2022) (30/09/2021) (30/06/2021)
NRS	Compliance with Funders' Property Governance Arrangements	NRS management must ensure that documented procedures are developed and finalised covering the processes within NRS for the collation, review and submission of information to ensure CPG comply with funders' legal agreement conditions. These procedures must take into account the varying expectations of each funder including the information to be provided and the timing of this. Thereafter, these should be approved by relevant management and communicated to all staff involved.	**High**	28/02/2022	The intention is that a report will be taken to the Climate and Sustainability Board on the 16/09/2022 proposing a new approach to management of utilities. Providing agreement is reached at the board, an action plan will then be developed to manage the transition to the new approach. To allow time for this to progress as planned, a further extension to 30/11/2022 has been requested.	30/11/2022
NRS	Compliance with Funders' Property Governance Arrangements	NRS management should ensure that all relevant Council and GL officers are aware of their roles and responsibilities in the process in respect of the requirements to seek consent in advance and provide any additional ad hoc information which may be necessary to ensure adherence with funders' requirements. Specific obligations should be included in the documented procedures to be developed in recommendation 1. Furthermore, a schedule for the completion and return of submissions to CPG must be developed by NRS management who must ensure adherence by the teams involved.	**High**	28/02/2022	Documentation confirming responsible officers has been developed and provided to Internal Audit. The current round of submissions are ongoing and arrangements are in place for these to be evidenced to Internal Audit on completion, it is anticipated this will be during September 2022.	30/09/2022

NRS	Compliance with Funders' Property Governance Arrangements	NRS management should ensure that an appropriate monitoring process is developed to place assurance on the accuracy of information provided before submission to CPG. NRS management must also ensure that all records and documentation, including submissions and supporting data, are adequately maintained and accessible to officers involved as required. This includes future returns and previous submissions.	**High**	28/02/2022	Documentation confirming responsible officers has been developed and provided to Internal Audit. The current round of submissions are ongoing and arrangements are in place for these to be evidenced to Internal Audit on completion, it is anticipated this will be during September 2022.	30/09/2022
NRS	Performance Management	Management from all services should review the current suite of key performance indicators to determine where documented procedures or process notes are required. Following review, management from all services should ensure that procedure notes are developed for all areas where this has been identified as being appropriate.	**Medium**	28/02/2022	Procedural templates have been issued to services to complete, with some already having been completed and returned. However, it became clear that due to the number involved some further time to complete this exercise would be required, resulting in a request for an extension until 30/09/2022 being made and subsequently approved.	30/09/2022
NRS	Dangerous Buildings	NRS management should conduct a review of all procedures held in relation to the management of the dangerous building incident reporting processes and ensure that these are up-to-date and reflect current working practices. Thereafter, these should be appropriately approved and communicated to all relevant staff.	**Medium**	31/03/2022	Development work identified during the first phase of the review requires to be progressed. This work relates to Uniform and Uniform Enterprise; however, this has been delayed by an ongoing upgrade to Uniform which is significantly behind schedule. The implementation have estimated that the work will require until at least the end of September to complete, subject to progress being made on the Uniform upgrade. In light of this the initial implementation date was moved back to 30/09/2022 to allow time for progress to be made.	30/09/2022
NRS	Dangerous Buildings	On completion of the procedural review outlined at recommendation 1, NRS management should remind all relevant officers of the importance of adhering to the dangerous buildings procedures and their requirements. In addition, appropriate action taken to address the errors identified during this audit review. In addition, officers should also be reminded of the importance of retaining and recording all relevant documentation in the IDOX system.	**Medium**	31/03/2022	Development work identified during the first phase of the review requires to be progressed. This work relates to Uniform and Uniform Enterprise; however, this has been delayed by an ongoing upgrade to Uniform which is significantly behind schedule. The implementation have estimated that the work will require until at least the end of September to complete, subject to progress being made on the Uniform upgrade. In light of this the initial implementation date was moved back to 30/09/2022 to allow time for progress to be made.	30/09/2022

NRS	Roads and Footways Permit Process	NRS management should put in place appropriate arrangements for ensuring that fees included in the Council's online application system for road and footway permits are updated promptly whenever any changes to the fees are agreed and implemented. NRS should also update the online system in order that all applications are submitted through this facility.	**High**	31/03/2022	With the permit fees update on the system now complete, Internal Audit confirmed a partial implementation of this recommendation. However, full implementation cannot be agreed until completion of the project to move all permit types online. Moving the Road Opening Permits online as part of the the wider website upgrade was being explored. The project team was advised that the Web Officer was liaising with CGI/SIT on this and have continued to pursue further updates / progress on this issue. Given the level of work required It is now envisaged that a realistic extension to the implementation date until the end of the 2022/23 financial year will be required.	31/03/2023
NRS	Roads and Footways Permits Process	NRS management should liaise with finance officers to develop appropriate arrangements to enable reconciliations between income received and permits awarded to be undertaken. Thereafter these reconciliations should be undertaken on a regular basis to enable any issues arising to be promptly identified and resolved.	**Medium**	31/03/2022	The Finance team have reviewed this issue and are pursuing a solution with the Head of Roads, the aim being to enable a reconciliation process to be put in place. As this has proved to be more resource intensive than originally anticipated, a request to extend the implementation date until 31/10/2022 has been submitted to Internal Audit, to allow additional time for this additional process to be undertaken.	31/10/2022
NRS	Developer Contributions	Similar to that of ENV2 and CGA's, NRS Senior Management should develop and implement a monitoring process for Fastlink contributions, to ensure that payments are received when due and in accordance with the legal agreement formed during the planning permission stage.	**Medium**	30/06/2022	A Meeting took place in late July between NRS and Internal Audit to discuss the new process model being introduced. Internal Audit were satisfied that the process now included Fastlink. However, the new system had not actively been adopted at that time, it was hoped that this will be completed by the end of August 2022. An extension to the implementation date until 31/08/22 was therefore agreed during the meeting. A further meeting with Internal Audit is scheduled for 05/09/2022, to review ongoing progress.	31/10/2022

NRS	Complaint Handling	The Customer Care Manager must communicate to all services the need to regularly review and monitor compliance with the CHP. This should include service level spot-checking of a proportion of complaints received by each service area. Where any anomalies or areas of non-compliance are identified, these should be fully investigated, with action taken to address the root cause and prevent reoccurrence. Additional support should be offered to staff where training needs are identified. The CHF should also consider whether there is a possibility of introducing customer feedback surveys as a means to identify and assess potential process improvements.	**High**	30/06/2022	On a quarterly basis the NRS Governance and Compliance Team (GCT) will undertake a spot-checking exercise, selecting a random sample of complaints and ensuring they have been dealt with in line with the CHP. Where any areas of noncompliance are identified, these will be fully investigated, with action taken to address prevent reoccurrence. Additional support will be provided by the NRS GCT to staff where training needs are identified to ensure future handling of complaints is undertaken in line with the agreed CHP. Additionally a revised implementation date of 30/11/2022 has now been agreed between Internal Audit and the lead service (CED).	30/11/2022
NRS	Complaint Handling	The Customer Care Manager should liaise with service management to reiterate the importance of fully resolving complaints and reflecting the outcomes in Lagan. Thereafter, complaint managers in each service should ensure that any unresolved or outstanding complaints are fully investigated and closed on Lagan, where it is appropriate to do so.	**Medium**	30/06/2022	NRS GCT has been working with PIMU and the CCT to create a Complaints Handling Dashboard to allow easier and more effective analysis of NRS complaints data. This will be utilised by the NRS GCT on a regular basis to monitor appropriate closures on LAGAN and work in conjunction with the CCT and NRS officers to ensure these are within the prescribed deadlines. In relation to outstanding complaints requiring closure, an exercise will be undertaken by NRS GCT to support the CCT and NRS officers to ensure any outstanding complaints are closed with appropriate actions having been undertaken. To ensure regular review and scrutiny of complaint data, a Complaints performance report will be brought to Leadership on a quarterly basis beginning January 2023. This will include data provided by NRS PIMU and analysis of information contained within the regular complaints reports which will be provided by the Customer Care Manager. Additionally a revised implementation date of 30/11/2022 has now been agreed between Internal Audit and the lead service (CED).	30/11/2022
NRS	Community Asset Transfers	Management should develop a suitable monitoring framework and ensure checks are conducted to verify organisations are fulfilling any terms and conditions attached to the transfer of assets. This additional stage in the process should be reflected in the documented procedures.	**Medium**	04/07/2022	A draft Monitoring Framework has been developed and is being finalised for submission to Community Asset Management Senior Management. A summary of the framework content has been provided to Internal Audit. It is anticipated that the finalised Framework will be in place by 30/09/2022. An extension to the implementation date to accommodate this was requested from Internal Audit, and subsequently approved.	30/09/2022

SWS	Workforce Planning	SWS should take a risk based approach to develop a training matrix (or similar) for all key posts within SWS, detailing the mandatory training required for each role. This should include details of any training that requires to be updated on a regular basis. Thereafter this should be communicated to all relevant staff. Managers responsible for monitoring the completion of training should ensure that all staff have completed the necessary training and that a record is held to allow management to identify training which needs refreshed or updated.	**Medium**	30/09/2018	Residential is now completed, however this requires to be reviewed to reflect new definitions for mandatory and changes to how courses are delivered. A review of training to establish what is a mandatory requirement is now being undertaken for all other job roles in SWS. The format and options for recording delivery of mandated training also to be considered and developed to support on-going reporting. This is on track for completion by end of December 2022.	**31/12/2022** (31/03/2022) (31/08/2021) (28/02/2021) (30/11/2020) (29/02/2020) (31/10/2019) (30/06/2019)
SWS	Fuel Cards	When the end date of the existing contract is approaching, SWS should liaise with the Corporate Procurement Unit to seek to implement a contract that better suits the needs of the service. Specifically, the supplier should be contractually required to enforce compliance with the information logging requirements in order to support the Council's control arrangements.	**Medium**	31/08/2020	SWS were advised by CPU that NRS should lead on the Initial Procurement Assessment. After recent discussion with NRS to establish where it was sitting, we were advised that the Transport team were re-focussed on other significant areas and have not had the opportunity to take this piece of work forward. On 11/08/22 NRS advised that this is back on their radar. To allow time for this piece of work to be carried out within NRS and to allow time for SWS to input to the specification, provisional revised date of 31 December has been agreed and updates will be provided following this.	**31/12/2022** (30/06/2022) (31/10/2021) (31/12/2020)
SWS	Adoption and Kinship Care	SWS should commit to finalising the kinship care documented procedures, with input from relevant stakeholders, and approval by management. Thereafter these should be issued and made accessible to appropriate staff for reference.	**Medium**	31/01/2022	This is in the last stages pre-presentation to Core Leadership and Governance. This has been delayed due to competing priorities elsewhere over the last months but is now on the agenda for completion.	30/11/2022
SWS	Adoption and Kinship Care	SWS management must obtain confirmation that satisfactory PVG checks were carried out for all relevant kinship carers. Thereafter, SWS management should review the record keeping arrangements to ensure that confirmation of PVG checks is adequately documented on care management records.	**High**	31/03/2022	Admin procedures are now resolved within North East. The PVG aspect has received a lot of attention from Team Leaders but will never be fully completed as our population of kinship carers is an ever moving one due to the lag in getting PVG returns from Disclosure Scotland. We do have a process in place for it now and a lot of remedial work is being done to update the gaps. Admin now record PVGs returns coming into the office and Kinship TLs have worked through a considerable backlog of recording gaps. For new carers coming on-line, Kinship Team Leads are continuing to track the completion and provide encouragement and assistance to the worker/Team Leader carrying the case. It is a standing item on each Kinship Steering group as part of the area updates and there is a performance recording template as evidenced from the minutes of the last meeting.	30/11/2022

SWS	Adoption and Kinship Care	SWS management must ensure that case records are completed with the documents which could not be located during the audit fieldwork, to ensure a complete and accurate record is maintained. SWS management should also review adoption record keeping arrangements more generally to ensure they are adequate.	**High**	31/05/2022	The briefings have happened as agreed in the report. We have been delayed completing the sampling exercise due to both my own and my two Assistant Service Managers unplanned period of absence. This has now started and will be completed in the next two weeks. This sample is also looking at the revised tracking system we introduced to track paperwork following the feedback from the internal audit.We have been delayed completing the sampling exercise due to both my own and my two Assistant Service Managers unplanned period of absence. This has now started and will be completed in the next two weeks. This sample is also looking at the revised tracking system we introduced to track paperwork following the feedback from the internal audit.	30/09/2022
SWS	Reablement Application	Social Work Services should ensure that audit trails are included, enabled and reviewed in the replacement for the Reablement system.	**Medium**	30/06/2022	The reablement system is a legacy system and as such no further development work can be undertaken. Eclipse, the replacement for the Reablement system, will have full audit trails. The Eclipse Programme is under review and final programme dates are still being assessed.	30/03/2023
SWS	Non-Contractual Overtime	In order to ensure that employment law is complied with and a record of employee working time is maintained, SWS management should put in place an adequate process for the collection and retention of employee working time opt out forms.	**Medium**	31/08/2022	A draft procedure has now been created in terms of the working time directive. This is now being reviewed by Senior Management and a final procedure will be in place within the next 4 weeks. This date has been extended to 30 September 2022 to allow time for this review and evidence to be provided thereafter.	30/09/2022