INTERNAL AUDIT FOLLOW UP OF RECOMMENDATIONS REPORT

Gedling Borough Council

December 2023

IDEAS | PEOPLE | TRUST

BDO

CONTENTS
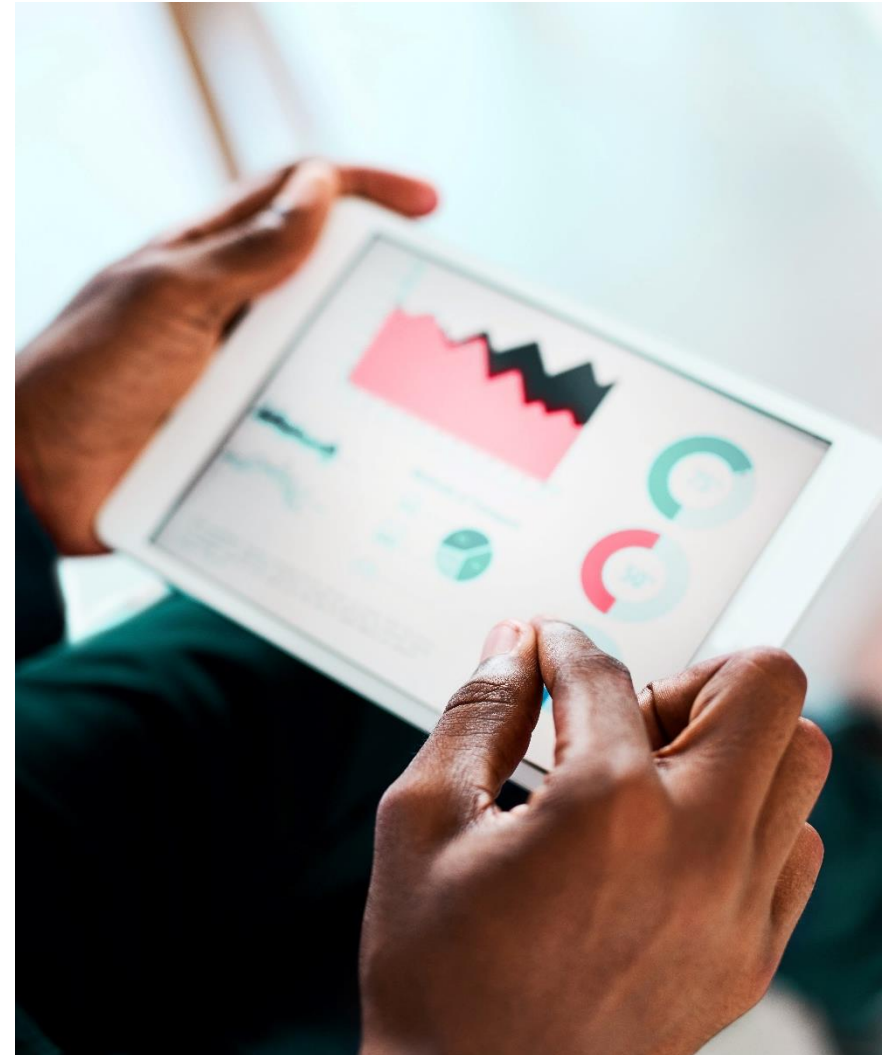
SUMMARY

Overall, there has been an improvement in the engagement of staff for follow up. We have implemented a process change with the Council by BDO being given access to the Pentana system, to bring audit recommendations updates in line with wider performance reporting and management across the Council. We also attended a Corporate Management Team meeting in October to present our approach to follow up to Heads of Service and re-iterate the importance of timely implementation of recommendation. This has resulted in a positive direction of travel over the implementation of historic recommendations.

LEGACY RECOMMENDATIONS (FROM RSM)

Please find below a summary of the status of implementation of recommendations arising from reports issued by the Council's previous internal auditors in 2018/19 and **Error! No text of specified style in document.**:

▸ Of the five legacy recommendations, two have been completed and there has been progress in the implementation of the other three which are expected to be fully completed in early-2024. The outstanding Procurement and Contract Management recommendation has been incorporated into the later review undertaken in 2021/22.
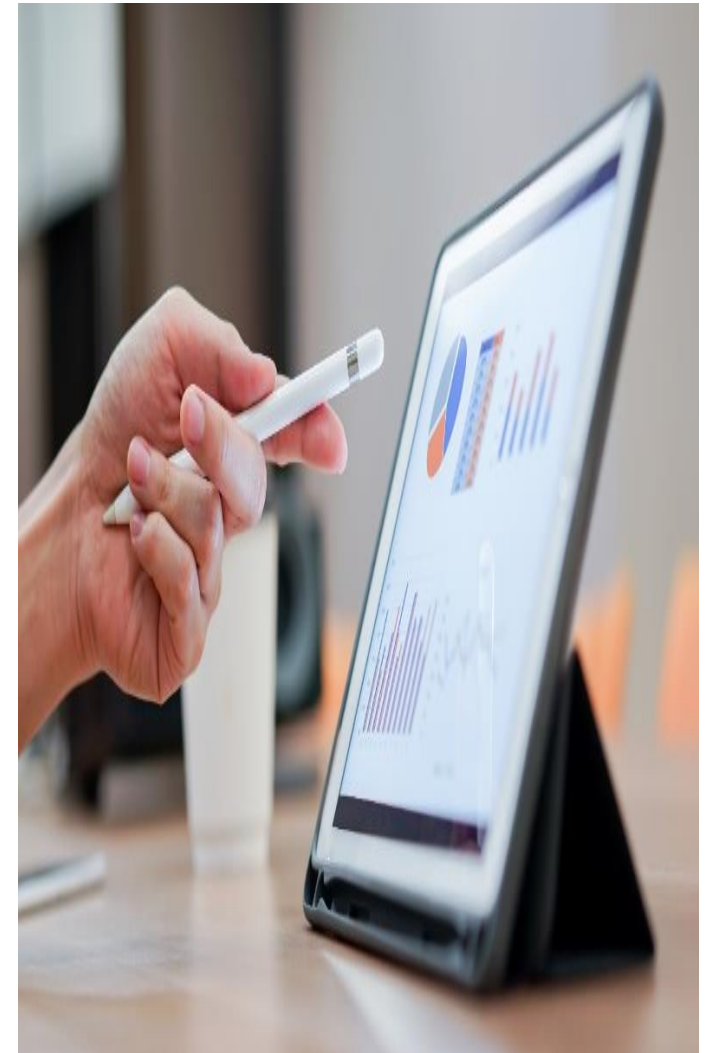
2020/21

Please find below a summary of the status of implementation of recommendations arising from reports issued in December 20231.

▸ Five of the seven recommendations outstanding from 2020/21 are now complete, with sufficient evidence provided to support the completion of the actions. One further recommendation from the Health and Safety review has been superseded by our 2023/24 audit

▸ There is one outstanding recommendation from the Health and Safety audit relating to the development of a car parks policy, to include details on frequency of site inspections.

2021/2022

Please find below a summary of the status of implementation of recommendations arising from reports issued in December 2023.

▶ 14 of the 29 recommendations from 2021/22 have been completed, with the majority of outstanding recommendations relating to the Risk Maturity and Procurement and Contract Management reviews. However, there has been significant progress on the implementation of these reviews and these are expected to be completed by March 2024.

2022/23

Please find below a summary of the status of implementation of recommendations arising from reports issued in December 2023.

▶ 10 of the 16 recommendations due from 2022/23 have been completed and one has been removed, leaving only five recommendations outstanding, including a High and two Medium recommendations for the Business Continuity and Emergency Planning.

RECOMMENDATIONS: COMPLETE

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2019/20. Council Tax	All new liabilities should be processed and set up on the Civica system within 14 days of the Council receiving original notification.	Medium 🟠	Andrew Solley, Revenues Manager	~~31/12/2022~~ 30/11/2023	**Management Comments:** A KPI has been set up on Civica for tasks to be completed in 14 days. This was confirmed in our 2023/24 Council Tax and NNDR audit. *Internal Audit Comments: We reviewed this as part of the 2023/24 internal audit review of council tax and NNDR where we confirmed the KPI was in place and monitored monthly.*
2020/21. Corporate Governance	The Council should put in place a system for declarations of interests to be completed by all staff initially and going forward by all new staff on appointment. All members of staff who have responsibilities for ordering goods and services should be required to confirm their interests annually. Monitoring should be undertaken to ensure that a current declarations of interests are captured.	Medium 🟠	Francesca Whyley, Interim Corporate Services Director	~~30/09/2022~~ 30/11/2023	**Management Comments:** The declaration of interests policy has been approved by ACSC. Details of the policy have been communicated to managers and the declaration forms have been prepared to be circulated to Chief officers. *Internal Audit Comments: We confirmed that the policy has been updated and communicated to managers.*
2020/21. Commercialisation	A. Current viable commercial services should have business plans developed. Details on what should be included in a business plan can be seen at Appendix III B. Moving forward, business plans should be established for future commercial services once they have been approved by Cabinet C. Business Plans should be reviewed on a periodic basis to ensure the services objectives and targets are appropriate. This should happen no later than 12 months from initial approval for all new business ventures.	Medium 🟠	Melvyn Cryer, Head of Environment	~~31/08/2022~~ 30/11/2023	**Management Comments:** A. There is a Business Case Project Initiation Document (PID) for the Pet Cremation Service which is being monitored on a bi-monthly basis to ensure its profitability. The commercial tree service has ceased, having been assessed as not profitable. Garden Waste and trade waste services never had a formal business plan but the profitability is monitored annually B. A business case has been prepared for the Pest Control service for reporting to the wider organisation C. Business Case PIDs are being monitored on a bi-monthly basis including an assessment of its profitability.

					Internal Audit Comments: We confirmed that business cases were prepared and monitored for commercial opportunities.
2020/21. Commercialisation	A. A formalised reporting structure should be established for commercial activities with agreed upon reports established which cover financial, operational and performance information B. Minutes, or at a minimum action logs, should be kept for meetings to ensure an adequate audit trail of monitoring is established and improvement actions are recorded and reviewed.	Medium 🟠	Melvyn Cryer, Head of Environment	~~31/08/2022~~ 30/11/2023	**Management Comments:** A reporting structure has been established for commercial activities with agreed upon reports produced by Environmental Services, Marketing & Finance. Minutes and agendas are produced for the meetings that these reports are presented to. *Internal Audit Comments: We reviewed an example of the commercial reports, agendas and minutes and confirmed that this has been completed.*
2020/21. Taxi Licensing	Update the vehicle inspection checklist used by workshop mechanics when documenting the vehicle inspections by adding in a comments section against each checklist criteria where the mechanic is required to provide a detailed narrative of what was identified during the inspection to substantiate the result. Following each inspection, the checklist should be reviewed and approved by a supervisor to confirm the checklist has been completed to a sufficient standard.	Medium 🟠	Kevin Nealon, Community Protection Manager	~~31/08/2022~~ 30/11/2023	**Management Comments:** The vehicle inspection checklist has now been altered and include a comments box to allow further comments to be added. It is also now being countersigned by the senior fitter present. *Internal Audit Comments: We reviewed the updated checklist and noted that there is a box for comments next to each section of the inspection checklist.*
2020/21. Taxi Licensing	Monthly management reporting should be established for all basic licensing information including metrics such as those detailed in the finding above. The service should determine which of these metrics is most important in terms of monitoring its performance and should set key performance indicators for these metrics, monitoring its performance against each of these in the management reports, including the trend from previous months.	Medium 🟠	Kevin Nealon, Community Protection Manager	~~31/08/2022~~ 30/11/2023	**Management Comments:** Monthly management reporting has been established for basic licensing information including metrics. Of those metrics identified performance against KPI has been agreed. These are reported to CMT and SLT through Pentana. *Internal Audit Comments: We reviewed the KPIs on Pentana and confirmed that these were regularly reported on.*
2020/21. Taxi Licensing	A. Update the application review checklist to include a specific section to record the result of the check of the NADN database.	Medium 🟠	Kevin Nealon, Community Protection Manager	~~31/08/2022~~ 30/11/2023	**Management Comments:** The checklist is updated with the results of the NAFN check and we upload instances of licence refusal and revocation. We are seeking Committee

	C. Implement processes to begin contributing to the NAFN database by uploading any instances of license refusals or revocations.				approval to upload backdated information in accordance with the NAFN best practice document.

Internal Audit Comments: We confirmed that this recommendation has been completed. |
| **2021/22. Asset Management** | A. A. A series of KPIs) should be agreed by the Property Services team and reported in a formal report each month to the Property Services Manager, for example:

• % rental income from Council properties received within 30 days

• Value of outstanding rental income

• % repairs completed within a specified number of days from the original request

• % of projects where cost is within +/- 5% of the estimated outturn

• % of projects falling within +/- 5% of the estimated timescale

• Customer satisfaction levels are above XX%

• % split between planned and responsive maintenance.

The Council should ensure that all Property Services Service Plan reports include a progress update against each KPI to ensure the SLT are aware of the progress being made against each of the measures. This should include some narrative in the report to explain the actions undertaken towards the completion of KPIs. | Medium 🟠 | Emma Wimble, Property Services Manager | ~~31/12/2022~~ 30/11/2023 | **Management Comments:** New KPIs have been agreed for asset management as part of the performance management framework and will be reported to Cabinet on a quarterly basis, including some of those recommended.

To support resources and capacity within the team, external resource will be considered to develop an Asset Management Strategy with KPIs.

Internal Audit Comments: We reviewed the performance reporting KPIs that have been developed and confirmed that these had been updated with a wider set of indicators. |
| **2021/22. Risk Maturity** | The format of the risk registers should be updated to ensure that the risks identified are directly linked to the objectives in the | Medium 🟠 | Tina Adams, Head of Finance and IT | ~~31/12/2022~~ 30/11/2023 | **Management Comments:** The risk registers have been amended to include a column to identify how risks identify to the Gedling Plan and service plans. |

	Gedling Plan 2020 – 2023 and service plans which they impact. Risks should also be categorised by risk type within registers (such as financial, compliance, service delivery, etc.) to enable enhanced risk mapping to take place, giving the Council a better understanding of which areas, it is exposed to the greatest risk.				*Internal Audit Comments: We reviewed some risk registers and noted there was alignment to the Gedling Plan and service plans.*
2021/22. Risk Maturity	All risk registers should be comprehensively reviewed, paying attention to the descriptions of risks. These should be updated and improved to ensure they sufficiently document the risk or hazard, its cause and the consequence should the risk materialise.	Medium	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** All risk registers have been reviewed and training by CMT has been delivered. All managers are advised to conduct a thorough review of the risk register at the end of each quarter. *Internal Audit Comments: We confirmed that there was an effective process for reviewing risk registers alongside training to CMT. We also noted that there was robust oversight of the corporate risk register.*
2021/22. Risk Maturity	All risks recorded on the risk register should be appropriately evaluated and assigned a risk score.	Medium	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** Each risk is given a risk score based on the evaluation. *Internal Audit Comments: We reviewed the corporate risk register and noted that each risk had been given a risk score.*
2021/22. Risk Maturity	All risks within the corporate register should be accompanied by a direction of travel, which shows previous risk scores for at least the last three quarters to provide the reader with an understanding of whether the actions taking place are effectively mitigating the risk over time.	Medium	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** The corporate risk register now includes arrows to demonstrate and track movement of risk for the last three quarters. *Internal Audit Comments: We reviewed the corporate risk register and noted that there are arrows indicated the direction of travel for each risk.*
2021/22. Risk Maturity	Where a risk has been evaluated with a current risk score equal to its raw risk score despite controls in place and documented on the register, a further review should take place to identify why the current controls are ineffective and what can be done further to improve the effectiveness of these controls.	Medium	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** This has been implemented through training for CMT and instructed to escalate issues to directors. *Internal Audit Comments: We noted that this training has taken place and the corporate risk register outlines future mitigating controls.*

2021/22. Risk Maturity	A comprehensive review of all registers should take place to improve the level of detail recorded for controls and action plans. All recorded controls should include narrative of how they mitigate the risk and all recorded actions should be SMART actions. Where an action has an implementation date that is overdue this should be raised with the risk owner to identify a specific plan to ensure the action is implemented in a timely manner with support from the SLT where needed.	Medium 🟠	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** All members of CMT have been given training on reviewing and identifying SMART actions to mitigate risks. CMT members have been instructed to cascade this to service managers. *Internal Audit Comments: We noted that this training has taken place.*
2021/22. Risk Maturity	The format of the service risk registers should be updated to ensure they include implementation dates for each action on the register.	Medium 🟠	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** Implementation dates are included in service risk registers. *Internal Audit Comments: We reviewed some service risk registers included target implementation dates for mitigating controls.*
2021/22. Risk Maturity	Risk registers should be updated to record the assurances obtained that controls in place to manage risks are working effectively and where there are gaps in these assurances. This should follow the three lines of defence model.	Medium 🟠	Tina Adams, Head of Finance and IT	~~31/12/2022~~ 30/11/2023	**Management Comments:** An additional column to risk registers to has been included in order to record and capture this information. *Internal Audit Comments: We confirmed the risk register has been updated accordingly.*
2021/22. Sustainability Growth: Employment and Skills	A. The Council should ensure that actions that were assigned to the previous Head of Regeneration and Welfare, and Economic Growth Manager are transferred to appropriate colleagues B. Actions should be reviewed to ensure they are SMART (suitable, measurable, attainable, realistic, timebound), with due dates that are feasible C. The progress of actions should be reviewed and updated within Pentana to reflect the current state of play D. In order for the Council to use Pentana effectively, training and/or guidance	Medium 🟠	Tanya Najuk, Head of Regeneration and Welfare	~~31/12/2022~~ 30/11/2023	**Management Comments:** A. The actions assigned to new Economic Growth and Regeneration Manager and Housing and Welfare Manager with property-related action partially retained by the Head of Service B. The actions that have been assigned are now SMART C. Managers update the progress against KPIs regularly in Pentana D. As above E. Pentana shows comments from historic updates as well as current updates F. Updates on performance are raised at the Regeneration and Welfare service area

	notes should be provided to all appropriate staff E. The ability for Pentana to include all previous updates against each action should be investigated F. Regular progress reports should be presented to SLT which includes an overview of the events that have been delivered and those that are upcoming G. The performance indicators should be reviewed to ensure they are SMART, with target values assigned.				G. Target dates are recorded on Pentana for the completion of actions to support effective monitoring. *Internal Audit Comments: We reviewed the KPIs in Pentana and confirmed that the recommendations had been implemented. Pentana has now been in use for several years and staff are therefore more familiar with the operation of the system.*
2021/22. Homelessness and Temporary Accommodation	The Council should work with Broxtowe Borough Council and Rushcliffe Borough Council to produce an updated Homelessness and Rough Sleeping Strategy and ensure that it addresses high local housing costs.	Medium 🟠	Paul Whitworth, Housing and Welfare Manager	~~31/08/2022~~ 30/11/2023	**Management Comments:** The strategy has been written and approved, with Cabinet have endorsing it in 2023. Meetings are held regularly with the partnering authorities to monitor the operational delivery of the strategy in each area and collectively. *Internal Audit Comments: We reviewed the updated strategy and evidence of regular meetings to oversee its operational delivery.*
2021/22. Homelessness and Temporary Accommodation	The performance indicators should be reconsidered to highlight performance against the new homelessness strategy, and also consider the achievement of the homelessness service objectives. They should also be specific to limit ambiguity. KPIs set should also be achievable and measurable by the Council to ensure that overambitious targets are not set. Performance indicators should allow the service to assess the impact of any new initiatives and should pinpoint areas for improvement. They should be robust, specific and measurable and also provide Elected Members and Senior Management with a critical analysis of the Council's performance in the prevention of homelessness.	Medium 🟠	Paul Whitworth, Housing and Welfare Manager	~~31/08/2022~~ 30/11/2023	**Management Comments:** KPIs for the service are reported on Pentana and reviewed at a CMT level. There are currently 41 KPIs which are based around commitments in the departmental and service plans. This is aligned to the Gedling Plan which is the overarching strategy. KPIs on staff performance are reported through pie charts in Abritas showing how many cases are managed and dealt with by officers. This is reported to the Head of Service and team leaders. *Internal Audit Comments: We reviewed evidence for the KPIs and confirmed that this recommendation has been implemented with a wider set of KPIs to monitor service delivery.*

Performance indicators could cover considerations such as:

- Prevention – are fewer people experiencing homelessness for the first time?

- Incidence of homelessness – are overall rates of homelessness declining?

- Length of stay in system – do people stay homeless for shorter periods of time?

- Successful resolution – do people resolve their housing/homeless crisis successfully by maintaining/obtaining permanent housing?

- Repeat incidents – are repeat occurrences of homelessness avoided or declining?

The Council should give consideration to adopting the following measurable Performance Indicators in order to specifically link into their Service Plan:

- Clients average length of stay in Bed and Breakfast accommodation in the last 18 months

- Active number of housing cases

- Average housing case per case officer

- Average housing case load

- Number of interventions realised.

The Council should carry out annual reviews of the key performance indicators used in the reporting of homelessness prevention to ensure they remain fit for purpose.

| 2021/22. Environmental | The Council should expand the Private Sector Housing Civil Penalties Policy to set | Medium 🟠 | Samuel Palmer, Food, | 31/03/2023 30/11/2023 | **Management Comments:** The Civil Penalties Policy is in the process of being updated. As part of the redrafting of the |

Health: Selective Licensing	out a methodology for how service requests should be prioritised. The Council could consider including a traffic light rating system within the initial inspection checklist to triage service requests and introduce a "priority indicator" action so that this assessment outcome is recordable on the database and can be reported on. The Council should also consider developing a process with the Council's Customer Service Team to obtain the information required to triage the complaints. This will enable service teams to risk rate service requests and prioritise these in order of importance in relation to other work commitments.		Health and Housing Manager		policy the team met with experts at Justice for Tenants to seek their input. It is more appropriate to include service request methodology in a separate team procedure which will need to be prepared. We also reviewed a Uniform priority report which outlines the criteria by which requests should be prioritised. *Internal Audit Comments: We reviewed the Uniform housing service request critical criteria and noted that this recommendation has been completed.*
2021/22. Environmental Health: Selective Licensing	Service teams should consider developing high level work plans for the week for each officer taking into account Service Plan actions, role specific commitments and service requests. This would help officers prioritise and manage work and provide management insight over department capacity.	Medium 🟠	Samuel Palmer, Food, Health and Housing Manager	~~31/03/2023~~ 30/11/2023	**Management Comments:** A Team Statement has been developed which sets out the high-level service plan priorities and officers are set annual targets to deliver the priorities in their performance development reviews. Staff are responsible for managing their own time and are encouraged to develop weekly and daily to do lists along with utilising outlook or a diary to manage their time. *Internal Audit Comments: We reviewed the Team Statement document and noted that this outlines high-level priorities for staff, aligned with the development of to-do lists.*
2021/22. Environmental Health: Selective Licensing	The Council should send a reminder or provide refresher training to staff detailing the importance of documenting service requests correctly.	Medium 🟠	Samuel Palmer, Food, Health and Housing Manager	~~31/03/2023~~ 30/11/2023	**Management Comments:** This recommendation has been expedited through discussions at team meetings and on a case-by-case basis through support/guidance by managers involved in cases with officers on specific areas such as customer enquiries to the manager, official complaints, MP or Councillor enquiries. We will continue to share this message in future team meetings. *Internal Audit Comments: We noted that this recommendation has been completed with effective*

					communication with officers on the importance of documenting service request correctly.
2021/22. Environmental Health: Selective Licensing	The Service teams should implement management spot checks on five service requests a month to ensure they are being filled out appropriately.	Medium 🟠	Samuel Palmer, Food, Health and Housing Manager	~~31/03/2023~~ 30/11/2023	**Management Comments:** A process has been developed for spot checks to be conducted at the start of each quarter alongside other corporate performance management checks. Performance will be updated in Pentana and discussed at monthly team meetings. *Internal Audit Comments: We noted that the performance is reported on Pentana demonstrating the completion of this recommendation.*
2021/22. Environmental Health: Selective Licensing	A. The Council should review the H&S policy and update it to include review information. We would expect annual review of the policy to ensure that it remains compliant with the Health and Safety at Work Act 1974, is relevant to current working practices and is in line with the Council's H&S objectives B. The Council should ensure the Corporate H&S Training Database is up-to-date and that all H&S training exceeding scheduled refresher dates are undertaken by employees and management C. The Council should develop a central training tracker to be used within each Service Team to identify and record training eligibility and also log training completed, dates completed and scheduled review dates for all officers.	Medium 🟠	Samuel Palmer, Food, Health and Housing Manager	~~31/03/2023~~ 30/11/2023	**Management Comments:** A. The Health and Safety Policy was reviewed and signed off by the Chief Executive in May 2023. B. The Head of Environment has raised at CHAS and CMT for a corporate training solution. As a result of this audit recommendation the Food, Health and Housing Team have established a central team training record spreadsheet. C. The Food, Health and Housing Team have established a central team training record spreadsheet. *Internal Audit Comments:* *A. We reviewed the policy and confirmed it provided sufficient information to complete this recommendation* *B. We confirmed that a central training record spreadsheet was in place to monitor staff completion of health and safety training, as well as other training.*
2021/22. Sustainable Environment	A. The Head of Environment should organise a quarterly progress meeting with each responsible action owner on the Environmental Services Service Plan to ensure the actions are progressing and on track to be completed by March 2023, and to understand and address the root cause of any delays. Any actions from other service areas	Medium 🟠	Melvyn Cryer, Head of Environment	~~31/03/2023~~ 30/11/2023	**Management Comments:** A. The Corporate Environment Group was set up in December 2022 with stakeholders to assess the root cause of delays in implementing actions B. The Council work and share resources with Nottinghamshire local authorities through quarterly meetings. As well as the following: Nottinghamshire and Derbyshire Local Authorities' Energy Partnership,

	relating to the sustainable environment objective should also feed into this process B. The Council should explore working with other local authorities in the area on this agenda. It should also identify further external funding opportunities to help deliver the actions. The Local Government Climate Change Hub offers a wealth of resources including information on upcoming events, relevant publications and notable examples of practice by other local governments. We have provided the link to the resource: Climate change hub | Local Government Association				Midlands Net Zero Hub, Marches Energy Agency, Association for Pubic Service Excellence, Local Government Association –CC hub, Energy Saving Trust, Local Government Chronicle, Nottingham Energy Partnership. *Internal Audit Comments:* A. *We reviewed the TOR and the agendas/minutes of the meetings and confirmed this has been completed* B. *We reviewed meeting minutes to evidence the cooperative approach with other local authorities in the area.*
2021/22. Sustainable Environment	A. Actions in the Carbon Management Plan should be reviewed to ensure they are SMART B. The Climate Change Officer should hold the meetings with the Heads of Service as soon as is reasonably practical. If these meetings are postponed by Heads of Departments, it should be escalated to SLT. This will ensure meetings occur in a timely manner and do not delay the Council in achieving its climate goal	Medium 🟠	Melvyn Cryer, Head of Environment	~~31/12/2022~~ 30/11/2023	**Management Comments:** A. Actions for the Carbon Management Plan have been agreed at the start of the financial year by each Head of Service to incorporate into their Service Plan and are SMART B. The Climate Change Officer attends the Corporate Environment Group to oversee and support the delivery of the Carbon Management Plan/Strategy. *Internal Audit Comments:* A. *We reviewed the actions in the Carbon Management Plan and noted that they followed the SMART requirements* B. *We reviewed the TOR and agenda/minutes of the meetings and confirmed this had been established and that the Climate Change Officer attends the meetings.*
2022/23. Corporate Governance	A. The Council should devise an ongoing training skills programme for Members which is regularly updated and reported to appropriate officers. The training skills programme for Members should include:	Medium 🟠	Francesca Whyley, Interim Corporate Services Director	~~31/12/2022~~ 30/11/2023	**Management Comments:** A training matrix/plan has been developed for senior officers, including undertaking governance training. Other training sessions have also been delivered in the past 12 months, including for procurement rules and fee setting. This matrix is reviewed by SLT to identify where sessions can be rolled out to address any gaps.

- The specific skills set members are required to have to successfully complete Members mandatory training courses
- A requirement of the skills required by the Committees to evidence the specific skills Members are required to demonstrate to fulfil their job role
- The minimum requirement skill level of competency to complete Member training courses
- References within the training skills programme which highlight specific areas which require additional training or further training, this could assist the Committees training courses for the year and could then link to a training log and the training opportunities provided to committee members
- The date the training was last attended by a Member which is quickly accessible.

B. The Council should devise a Corporate Governance training programme which is regularly updated to ensure that Senior Managers have the skills required to fulfil their job roles.

A training matrix for Elected Members has also been developed since the recent elections, identifying training required from members at specific intervals. Member training is managed by the Democratic Services Team who ensure for new members the induction timetable is completed and committee-specific training is provided to relevant Members.

The training matrix enable the Council to identify and ensure new starters complete all corporate training modules required by the matrix. It is also used to set new dates for refresher training, reflecting the regularity of each training module. Other training needs identified through CMT or SLT are incorporated into the matrix.

Internal Audit Comments: We confirmed that the training matrices were in place to identify and monitor the completion of corporate training modules.

2022/23. Corporate Governance	The Head of Governance and Customer Services should ensure officers Gifts and Hospitality are reported to the Councils Senior Leadership Team on a quarterly basis as per the Council Gifts and Hospitality Policy and to ensure that the Local Code of Corporate Governance upholds its commitment to Core Principle A 'behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law'.	Medium	Francesca Whyley, Interim Corporate Services Director	~~31/12/2022~~ 30/11/2023	**Management Comments:** Quarterly updates have been provided to SLT on the Gifts and Hospitality Register with the policy outlined in the Constitution. *Internal Audit Comments: We confirmed that updates on the Gifts and Hospitality Register are updated to SLT.*

2022/23. Corporate Governance	The Council should devise a set of questions that support self-assessment by committees either on an ongoing basis as part of their meetings, or as part of an annual process. Key questions could include: • Did we receive all the relevant information we needed to discuss agenda items? • If not, where are the gaps in information? • Did we have enough time to discuss all agenda items? • What strengths can we identify? • Are we satisfied that all actions have been appropriately completed and followed up? • How do we know/what evidence do we have that sustainable change has been implemented following decision-making? • Is there full levels of committee wide engagement from meeting participants which is evidenced through the meeting minutes? We have also included a template assessment from CIPFA in Appendix I for consideration by the Council.	Medium 🟠	Francesca Whyley, Interim Corporate Services Director	~~31/12/2022~~ 30/11/2023	**Management Comments:** Self-assessment questionnaires were sent to all committee members based on the questions proposed in the audit report. *Internal Audit Comments: We reviewed the self-assessment questions and noted that these covered the areas suggested by CIPFA in the audit report.*
2022/23. Recruitment and Retention	A. The CF1 form should be updated to include a checklist of required documents, timescales of what has been received and when a reminder has been sent B. Pension forms should be chased in a timely manner and ensure that a copy is saved on the employees' personal file C. Statement of conditions should be completed and maintained on file for transfer posts	Medium 🟠	David Archer, Head of HR, Performance and Service Planning	~~31/12/2022~~ 30/11/2023	**Management Comments:** A. The CF1 form templates has been updated with a checklist of required documents and timescales for when these have been received. B. Pension forms are chased regularly as part of the induction process C. Statement of conditions are maintained on file for the transfer posts D. The signed statement of conditions and PEN1 forms have been obtained for the sample.

	D. The signed statement of conditions and PEN1 form should be obtained for the sample above as well as for any new starters going forward.				*Internal Audit Comments: We reviewed the supporting evidence for all recommendations and confirmed the documents had been added to the file or templates updated in line with the recommendation.*
2022/23. Remote Working	A. Management should be informed of the requirement to complete the correct self-assessment forms for employees via email as a minimum B. Self-assessment forms should be reviewed and signed by managers when there is a change in the user's individual capabilities or a significant change into the workstation C. For Line Managers to store the completed designated self-assessment forms in a secure shared folder with data protection to ensure it can be accessed by other appropriate employees, and/or ensure that they hand-over these documents to another colleague in the event that they leave the Council.	Medium 🟠	Francesca Whyley, Interim Corporate Services Director	~~31/03/2023~~ 30/11/2023	**Management Comments:** The Corporate Health and Safety Group, consisting of heads of service, have been advised that managers must completed maintain DSEs for all staff and any adaptations should be referred to Health and Safety Team for advice and to order any necessary furniture. *Internal Audit Comments: We reviewed the minutes of the Corporate Health and Safety Group meeting and confirmed that this message had been given to heads of service.*
2022/23. Building Control	Management should ensure that the inspection notes for building control applications are completed and uploaded to the Uniform system. These should highlight what was conducted during the inspection, if the appropriate work has been conducted and whether any issues or concerns were raised in addition to any other items that the Building Control Surveyors wish to include. Support and training for the Uniform system should be provided for the user to ensure that the inspection notes are completed within Uniform going forward.	Medium 🟠	Mike Avery, Head of Development and Place	~~30/11/2022~~ 30/11/2023	**Management Comments:** The issues identified related to a single user. Therefore the matter was dealt with informally, with the Team Manager and the Technical Officer providing ad-hoc informal training to the identified user immediately following the audit. A sample of 10 random cases allocated to the identified user were checked in February 2023 and all notes were updated in the Uniform system. *Internal Audit Comments: We confirmed that the follow up action had been taken on the identified user's cases.*
2022/23. Workforce Strategy	A. HR should remind managers of the necessity of PDR completion. This could be done through three emails: one reminder email in December, a month in advance of appraisal season; one	High 🔴	David Archer, Head of HR, Performance	A. 30/11/2023 B. 30/09/2023 C. 30/09/2023	**Management Comments:** A. The reminders to managers for completing PDRs has now been diarised annually.

email in January, at the beginning of PDR season; and the final email in March, to remind managers that the PDR window is about to close

B. SLT should also raise the completion of PDRs as a priority with Heads of Service and follow up with those Heads of Service where completion rates were particularly low

C. At the end of the annual appraisal season, HR should send an email to managers asking whether there are any training requests. This would help to ensure that training needs raised during PDRs are met. Recurring themes should be pulled together from contact with senior managers (Heads of Service) at the close of the PDR window.

and Service Planning

Andrea Snodin, HR and Training Manager

B. Escalation of the non-completion of PDRs to Heads of Services has now ben diarised annually.

C. An annual email to managers seeking to obtain further training requests identified from the PDR process have been diarised for the next PDR season.

Internal Audit Comments: We confirmed that escalation and chasing for future PDR periods had been set in diaries.

RECOMMENDATIONS: IN PROGRESS

These recommendations have been marked as In Progress relating to reviews from the prior year or current year that have not been implemented. For all outstanding recommendations, we have revised the due date and will continue to follow up on the implementation of the recommendations as they fall due.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2022/23. Business Continuity and Emergency Planning	A. The Council should ensure that its plan to refresh and implement the corporate and departmental BCPs, incorporating the BIAs, is completed in line with its targeted time scale. It should ensure that the following areas are included within these BCPs: • A risk management section should include additional risks and allow for the addition of those identified by service areas. The Community Risk Register held by the Local Resilience Forum, can be utilised to aid this as it details top risks including transport and malicious threats that should be considered B. Following the refresh of the BCPs, all service managers should be reminded that they are responsible for maintaining the BIA/BCPs. The Business Impact Analysis for Health, Safety and Emergency Planning, which although is slightly overdue for review, gives a good indication of the level of detail required and how the BIAs can be best utilised. This could be provided as an example of best practice to Service Managers to enablee them to improve their own BIA/BCPs C. In accordance with the BCP Policy, all BIAs/BCPs should be reviewed periodically or after a significant event to ensure that they are updated in a timely manner. Spot	High 🔴	Francesca Whyley, Interim Corporate Services Director Rebecca Hutchinson, Health, Safety & Emergency Planning Manager	~~31/07/2023~~ 31/03/2024	**Management Comments:** A. All draft BCPs were considered at SLT on 31st August and managers given a deadline of 30th September for plans to be finalised and centrally located on the shared drive. The majority of departments have submitted plans, some require further review B. Managers were reminded at CMT that it is their responsibility to update BCPs. Further reminders will be given and the position reflected in the Emergency Plan once it has been reviewed C. The BCP was recently tested through loss of heating in the Civic Centre. Lessons were learnt for effective communications and ensuring adequate impact assessments are maintained. This action is ongoing, and the date should be amended as tests will arise as exercises/real life situations develop D. The templates for individual areas have been amended to include a distinction between the impact and planning criteria. There is still further work to be undertaken on the corporate Business Continuity Policy and Business Continuity Plan which will reflect the distinction.

checks on the completion of this should be performed by the Health, Safety and Emergency Planning Manager

D. The format of the BIA document should be reviewed and amended to include a clearer distinction between the BIA and the BCP. A clear section for a detailed action plan should be included within the document

2022/23. Business Continuity and Emergency Planning	The Business Continuity Policy should be updated to reflect: a) Current practice with regards to BIAs/BCPs. This should: • Identify whether the Council will implement separate BIAs and BCPs or further develop the existing BIAs • Establish whether BIAs/BCPs will cover departments or service areas underneath them (where appropriate) • Give guidance on what critical functions should be considering, including IT, HR, external suppliers and staff/public health & safety b) How the Council's Emergency Planning process and plans intersect with BCPs c) Outline the process for escalating risks to the Risk Register d) The Policy should be reviewed biennially to ensure that it reflects current practice and in particular that roles and responsibilities and any key contact information is up-to-date.	Medium	Francesca Whyley, Interim Corporate Services Director Rebecca Hutchinson, Health, Safety & Emergency Planning Manager	~~31/12/2023~~ 31/03/2024	**Management Comments:** The Corporate Business Continuity Policy is in the process of being reviewed due to limited resource available to complete this piece of work. We have approached Nottinghamshire County Council to seek support to develop the Business Continuity Plan and Emergency Plan by March 2024 in line with Service Plan timescales.
2022/23. Business Continuity and Emergency Planning	A. The Council should develop a regular testing schedule/timetable for BCPs and other emergency plans. This should require all BCPs to be tested periodically or after an event. A combination of tabletop, discussion and live exercises	Medium	Francesca Whyley, Interim Corporate	~~31/12/2023~~ 31/03/2024	**Management Comments:** A. The BCP will be tested when an incident arises or otherwise through organised exercises. This is an ongoing action but specific timetables for Emergency Plan testing will be

	should be used, with more frequent checks to ensure contact information, plan activation procedure and plan objectives are up to date and relevant B. The Business Continuity Policy should require all service BCPs to be tested biennially, at a minimum, by the Head of Service and service manager, in line with the testing schedule. Heads of Service should be required to confirm that the service plan has been tested to the Health, Safety and Emergency Planning Manager so they can retain a central log for which areas have been tested. Alternatively, due to the Council's small size and limited capacity, it may wish to consider testing the key BCPs, such as finance, ICT, etc more regularly with less frequent testing of other areas. The frequency for each testing in each service area should be agreed and defined in the central log.		Services Director Rebecca Hutchinson, Health, Safety & Emergency Planning Manager		developed. However, due to limited capacity in the team we are seeking support from the County Council B. BCP has had a minor test through heating issues in the Civic Centre. Testing will be rolled out more widely following specific incidents and emergencies. Alongside this a timetable is to be agreed for Emergency Plan testing.
2022/23. Workforce Strategy	A. The Council should identify and document all key and critical roles across all service areas. The document should outline next steps if these become vacant. Actions could include timelines for when critical vacancies should be filled by, and next steps if they are not filled. Employment and Recruitment Agency Blue Arrow provides useful guidance for identifying key or critical roles, as roles that would meet at least one of the following criteria: • They are critical to achieving the organisation's strategy, either in the design or the execution of that strategy. These are roles where the loss of a high-performing incumbent could result in organisational and, by extension, financial disruption • They are a source of the organisation's current comparative	Medium 🟠	David Archer, Head of HR, Performance and Service Planning Andrea Snodin, HR and Training Manager	~~30/09/2023~~ 30/04/2024	**Management Comments:** A Succession Plan template spreadsheet has been drafted to identify and record key posts. This is now being tested and will be trialled with two Heads of Service to assess its effectiveness. This will be circulated with Heads of Service at the start of the next round and future rounds of performance development reviews.

advantage; their capabilities provide differentiation which enables them to provide a service for customers that is unique, faster or done so at a lower cost

- They are a source of the organisation's future comparative advantage; their capabilities will enable the organisation to excel in the future – according to future risks and opportunities, for example (this means that some critical roles may not yet exist).

B. Discussions with the Head of HR, Performance and Service Planning highlighted that the Council would like to foster a systematic approach to succession planning in the next Workforce Strategy, as they are aware of the risk in this area. The Council should carry out and document succession planning, with a particular focus on identifying key roles (sole specialists for example) to protect organisational knowledge and mitigate against organisational fragility. Successors may be selected either by informal methods, such as conversations with managers, or by formal methods, such as the performance review process and assessing competencies (and plugging any gaps through training). Therefore, completion of Performance Development Reviews is important for succession planning (please see Finding 1).

C. By considering key changes that may occur over the next two years, the Council should identify and document the skills gaps which need to be addressed by carrying out Performance Development Reviews (please see Finding 1). Following this, the Council may wish to create an action plan to address skills gaps (through

training, for example), which is periodically reviewed.

RECOMMENDATIONS: OVERDUE

These recommendations have been marked as Overdue as they are recommendations relating to reviews before the prior year that have not been implemented. For all outstanding recommendations, we have revised the due date and will continue to follow up on the implementation of the recommendations as they fall due.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
Legacy. Contract Management and Procurement	Once the Council has its own licence for the e-procurement system a digital register facility will be available for use through the Contract Management module. All Council contracts will then be held on this system.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** The In-tend module has been purchased but not yet activated. The Procurement Team have a meeting planned with software providers for October to implement the system for use.
Legacy. Property Investment, Miscellaneous Properties & Facilities Management	Finalise plans for programme of property asset condition surveys and obtain necessary resources.	Medium 🟠	Emma Wimble, Property Services Manager	~~30/11/2023~~ 31/03/2024	**Management Comments:** There are 10 operational/community buildings that have an outstanding Condition Survey. Property Services are assessing its resource to source a cost for the completion of these surveys. Where buildings have been decommissioned the condition survey will be light touch.
Legacy. IT General Controls	Review and update IT Strategy to support overarching Corporate Digital Strategy which will be developed following sign off or Gedling Plan.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** An internal Digital Transformation Team has been established and an external consultant has been engaged to prepare the new IT Strategy. We expect this to be completed by January 2024.
2020/21. Health and Safety	A. The Car Parks Maintenance Policy should be reviewed and updated accordingly. The policy currently requires the street lighting to be inspected four times a year, but they are now only inspected twice yearly. It should be ensured that the current inspection regime is risk assessed and is adequate in its reduced frequency. This policy should then be approved/ratified accordingly B. A policy for the inspection of Council managed open spaces should be written and approved accordingly C. Review whether there are inspection policies available for all Council managed	Medium 🟠	Tanya Najuk, Head of Regeneration and Welfare	~~30/11/2023~~ 31/03/2024	**Management Comments:** A scoping document has been drafted and neighbouring council has been approached to develop a Car Parks Policy, to include charging and inspection. The Council are waiting for a response from the neighbouring authority to undertake a review of car park provision which will support the policy. Resource may need to be procured to support the review of the Council's car parking provision.

	sites, and ensure a consistent approach to the monitoring of inspection processes is undertaken. The HSEPO should look to identify whether service areas are high, medium or low risk in relation to their need to conduct sufficient inspections (for example, open spaces, leisure and transport would be high risk, office based areas would be low risk) D. Ensure that policies developed, in particular relating to Open Spaces, include sufficient processes for addressing any defects noted. Specific time frames and guidance for prioritising work on defects should be included, for example RAG ratings could be used to indicate severity of observed defects.				
2021/22. Risk Maturity	Provide risk management training to all staff across the Council on a periodic basis as part of mandatory training cycles. The level of training should be proportional to the level of responsibility for risk management the officer/member holds. Heads of service and managers should be provided with comprehensive training to enable them to identify and adequately document a risk, identify appropriate mitigating controls and assurances and identify SMART actions to mitigate the risks. Officers below manager level should be provided with training to give them a sufficient understanding and appreciation of the importance of risk management and how it impacts their role. As a minimum, it should be every officer's responsibility to be aware of what risk is, to be able to identify factors that could indicate an increased level of risk that may need to be escalated to their manager and to report on this when it is identified.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** Risk management training was delivered to CMT in September 2023, with heads of service tasked to cascade information to service managers. The Council is currently undertaking a review of its Risk Strategy and will roll-out training to staff in early-2024.

2021/22. Risk Maturity	The roles and responsibilities section of the Risk Management Strategy and Framework (including Appendix 2) should be updated to ensure it includes the responsibility of officers below manager level within the risk management function. As a minimum their responsibilities should include the need to understand risk management and its importance to the organisation and to be able to identify risk factors that could indicate an increased level of risk and to report these to their managers.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** The Council is currently reviewing its Risk Strategy. Roles and responsibilities will be defined and amended as part of this review. The revised strategy is expected to be signed off in January 2024.
2021/22. Risk Maturity	The Risk Management Strategy and Framework should be reviewed and updated as necessary to ensure the information included is up to date and accurately reflects current procedure. It should also be updated to incorporate the recommendations raised in this review once implemented. Document control should also be added to the front cover of the Strategy to record who is responsible for managing the document and signing off changes, when the document was last updated, who approved the last update and a record of amendments to the document over time.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** The Council is currently reviewing its Risk Strategy. Roles and responsibilities will be defined and amended as part of this review. The revised strategy is expected to be signed off in January 2024.
2021/22. Risk Maturity	The Risk Management Strategy and Framework should be updated to include enhanced guidance on the identification of risk, including specific methods that officers should use to ensure that all risks within their service have been identified and recorded within their risk register	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** The Council is currently reviewing its Risk Strategy. Roles and responsibilities will be defined and amended as part of this review. The revised strategy is expected to be signed off in January 2024.
2021/22. Risk Maturity	The actions within the corporate risk register need to be reviewed to update the status of each action and ensure that the implementation status of the action accurately reflects the quarterly updates recorded.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** Instruction has been given and implementation of the strategy is currently underway. *Internal Audit Comments: To support the delivery of this recommendation, we noted that the corporate risk register was monitored in detail at the September 2023 Audit Committee*

					meeting with robust discussions on the mitigating controls for each risk and future planned actions to further mitigate the risk.
2021/22. Risk Maturity	The Risk Management Strategy and Framework should be updated to include the mechanisms in place to ensure discussions and decisions made at SLT meetings relating to the service risk registers are fed back to the relevant services in a timely manner.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** This will be included as part of the overall review of the strategy which is currently underway and due to be completed in January 2024.
2021/22. Risk Maturity	Once the other recommendations from the report have been implemented and embedded to improve the foundations of the Council's risk management function, KPIs should be used to measure the effectiveness of risk management activity at the Council. This can include the proportion of risks operating at the target level and/or the overall effectiveness of risk management (current risk versus target risk etc.). See Appendix II for a list of possible KPIs.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/03/2024	**Management Comments:** There has been limited progress on this recommendation due to the current review of the Risk Strategy. Once new strategy is adopted we will consider appropriate KPIs to track risk management performance.
2021/22. Environmental Health: Selective Licensing and Warden Enforcement	The Council should implement regular performance monitoring that identifies: • Number of cases that have not been responded to in the two-day period • Number of cases that have not been closed in the appropriate timeframe as set by the Council. Access reports should be developed to extract key information on service requests for discussion at team meetings and reasons should be provided for exceptions. These should be monitored by the Head of Environment. We would suggest that this is carried out on a fortnightly basis to begin with until the backlog has been cleared. Following this, monitoring should be carried out at least monthly.	Medium 🟠	Samuel Palmer, Food, Health and Housing Manager	~~30/11/2023~~ 31/03/2024	**Management Comments:** This is being progressed at the beginning of each quarter. The Food, Health and Housing Manager runs a report listing open investigations, critical prioritised cases and cases responded to in time to discuss at team meetings. A process has not yet been developed for auditing of file records.
2021/22. Sustainable Environment	The Council should consider developing an Environmental Risk/Impact Assessment to use in decision making and integrating carbon management into their Capital Strategy to	Medium 🟠	Melvyn Cryer, Head of Environment	~~30/11/2023~~ 31/03/2024	**Management Comments:** Work is in progress on the climate impact assessment to be used in Executive Decision making reports, this should be ready to launch in late-2023.

	ensure most effective use of resources and alignment of strategies.			
2021/22. Procurement and Contract Management	The Council should: • Create and disseminate to all Officers adequate guidance on contract management, including what form this should take, its frequency, and internal routes of escalation. It should also include details of how contracts procured by partners on behalf of the Council are recorded in the Contracts Register (ie that, per the Terberg Matec contract detailed in Finding 3, the contract is not recorded however anything procured under the framework by the Council is recorded) • Ensure this guidance is adequately reflected in the Strategy • Provide examples of the nature of contracts for which a suite of KPIs should be a requirement • Provide guidance/training on how to create KPIs that are SMART.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/06/2024	**Management Comments:** The In-tend contract management tool has been procured and a plan for implementation is currently being considered. Training for staff will follow the implementation of the system.
2021/22. Procurement and Contract Management	A. Prior to the SLA being reviewed, the Council should review the included KPIs and assess if they are SMART (specific, measurable, attainable, realistic, time-bound), or suggest appropriate alternatives B. For each KPI, an appropriate target should be set and agreed with Bolsover District Council C. The Procurement Strategy should detail how the performance of the Procurement Team will be measured and monitored D. Monthly or quarterly performance against the KPIs should be reported, and where performance is below-target, appropriate steps should be taken to rectify this	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/06/2024	**Management Comments:** A new Head of Service is now in post and is facilitating a review of procurement plans. A monthly meeting is held between the Finance Team and the Procurement Team and feedback from suppliers is being received. Feedback from service users is currently being considered and an implementation plan will be developed.

	E. A satisfaction survey should be sent to Officers involved in a procurement process, on a bi-annual basis to actively receive feedback.				
2021/22. Procurement and Contract Management	A. The Council should run a supplier spend report for 1 April 2021 to 31 March 2022 and review the aggregate spend for all suppliers with expenditure greater than £10,000. This should be completed on an annual basis with appropriate action taken to ensure compliance with Council procurement rules B. All procurements over £10,000 should go through the Procurement team and officers should be reminded via email of this requirement C. The Contracts Register should be updated quarterly and published on the Council's website.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/06/2024	**Management Comments:** Following the implementation of the procurement system, strategy and training, the Council will run reports to track supplier spend.
2021/22. Procurement and Contract Management	A. The Council should review and update both documents to ensure they are consistent with each other and relevant legislation B. The Council should complete, approve and finalise its Procurement Strategy as soon as possible C. The Council should ensure the Social Value Policy includes the above areas D. The responsibility of ensuring that committed social value benefits are delivered should be included within the contract management guidance per Finding 2 E. The Procurement Strategy should be finalised, approved by Cabinet, published and communicated to officers to raise awareness.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/09/2024	**Management Comments:** This work will be aligned with the amendments to procurement legislation and is already included in Legal Services plan for implementation between March and September 2024. This is dependent on the changes to the legislation.

	F.	The Social Value Model guidance could be used to support the development of a Council Social Value Policy.			
2021/22. Procurement and Contract Management	A. b.	Contract Managers should ensure accurate contract renewal information is included in the Contracts Register, and proactively monitor their contracts with respect to renewal. The Procurement team should report on its monitoring of contract renewals via its workplan on a monthly basis.	Medium 🟠	Tina Adams, Head of Finance and ICT	~~30/11/2023~~ 31/06/2024	**Management Comments: The** Contract Register is currently being sent out quarterly on an interim basis. Systems are currently being investigated to enable this task to be more robust.

RECOMMENDATIONS: REMOVED

These recommendations have been Removed as they are either no longer applicable or have been superseded by other processes.

AUDIT	ACTIONS AGREED	PRIORITY LEVEL	MANAGER RESPONSIBLE	DUE DATE	CURRENT PROGRESS
2020/21. Health and Safety	A. Service Area Managers should be reminded of their responsibility to ensure risk assessments in their area have been signed-off and are reviewed at the required date B. All mitigating actions which remain outstanding should be identified, the appropriate action undertaken (eg training, purchase of personal alarms) and signed off as complete.	Medium 🟠	Rebecca Hutchinson, Health Safety and Emergency Planning Manager	N/A	*Internal Audit Comments: Risk assessments have been included in the scope of our 2023/24 review of Health and Safety, therefore this supersedes these recommendations.*
2020/21. Taxi Licensing	B. When completing the check against the NAFN database take a screenshot of the search result to confirm no records have been identified which impact the applicants 'fit and proper person' status and upload these screenshots to the Uniform file.	Medium 🟠	Kevin Nealon, Community Protection Manager	~~31/08/2022~~ 30/11/2023	**Management Comments:** We do not take screenshots of the search result as this could result in the Council unnecessarily processing and storing confidential data. We believe that the NAFN would not approve of information from their system being screenshotted.
2021/22. Homelessness and Temporary Accommodation	As per the South Nottinghamshire Homelessness and Rough Sleeping Strategy dated 2019-2021 the Council should ensure that clients' assessment of needs are reviewed at regular intervals. The frequency of the regular reviews should be agreed (eg weekly/bi-weekly until any accommodation duty is discharged). Officers should use the inbuilt functionality in the Abritas system to set diary reminders which will prompt officers to update client's case notes, and it will also remind them of the need to contact clients to ensure that the	Medium 🟠	Paul Whitworth, Housing and Welfare Manager	N/A	**Management Comments:** The Council develop its strategy with other local authorities in South Nottinghamshire. It has been agreed that Rushcliffe Borough Council will lead on the current strategy. Recent meetings have covered the progress in delivering the strategy, allocating responsibilities and roles. It is expected these meetings will be bi-annual. The Housing and Welfare Manager is reviewing procedures as part of the new Head of Housing Strategy. A transformation working group has been convened to assess how the Council use its systems and functionality. As the contract with the current provider is due to end, it is preferred that high levels of resources are not used on addressing its current functionality.

	client's assessment of needs is regularly reviewed and updated.			
2021/22. Homelessness and Temporary Accommodation	The Council should pursue formulating a New Licence Agreement with the aim of introducing a daily charge to individuals/households who occupy Bed and Breakfast accommodation. The Council should re-assess internal arrangements and undertake their own spot checks on individuals/households who have spent significant amounts of time in Bed and Breakfast accommodation. These checks should be documented.	Medium 🟠	Paul Whitworth, Housing and Welfare Manager	N/A	**Management Comments:** The Licence Agreement is currently with the legal team to review. However, as the Council are purchasing more properties to let, it wants to tighten up on its legal agreement. As an interim control, tenants are required to sign a one-page document outlining their responsibilities but this is not legally binding.

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