

central midlands audit partnership

# Derby City Council – Audit Progress Report

Audit & Governance Committee: 3<sup>rd</sup> November 2021



Derby City Council



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## Our Vision

To bring about improvements in the control, governance and risk management arrangements of our Partners by providing cost effective, high quality internal audit services.

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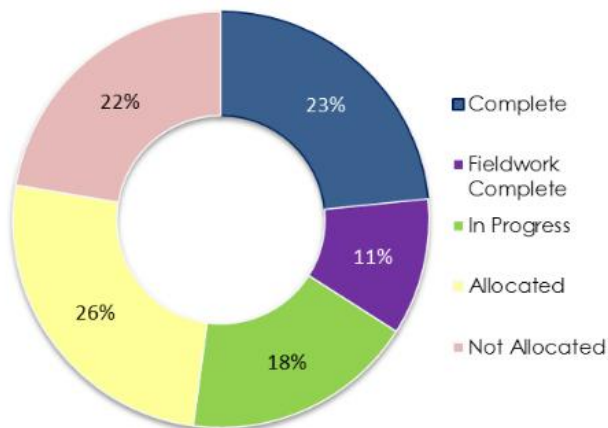
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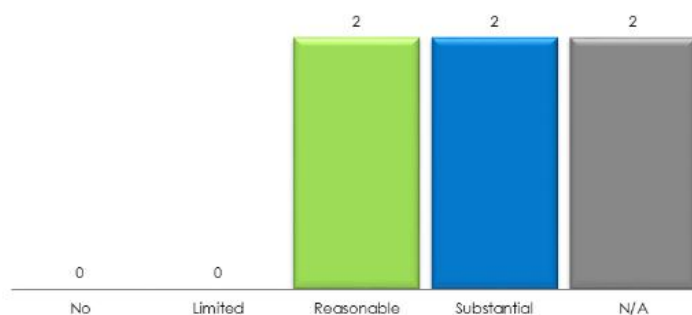
### AUDIT DASHBOARD

#### Plan Progress



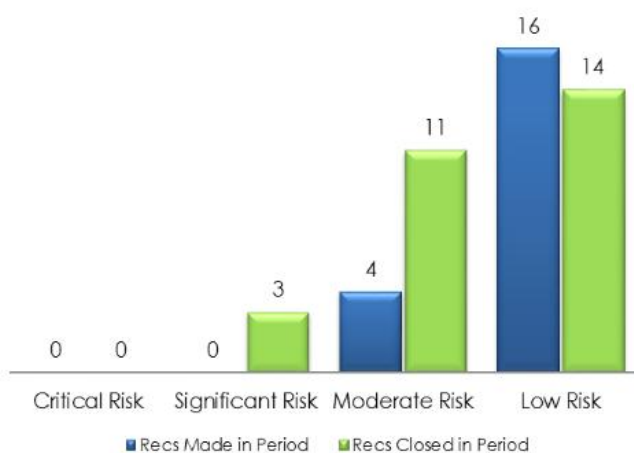
#### Jobs Completed in Period

Control Assurance Ratings During Period



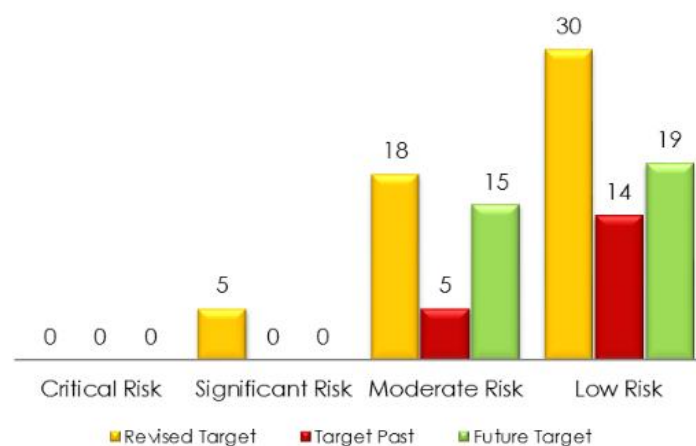
#### Recommendations

Movement During Period



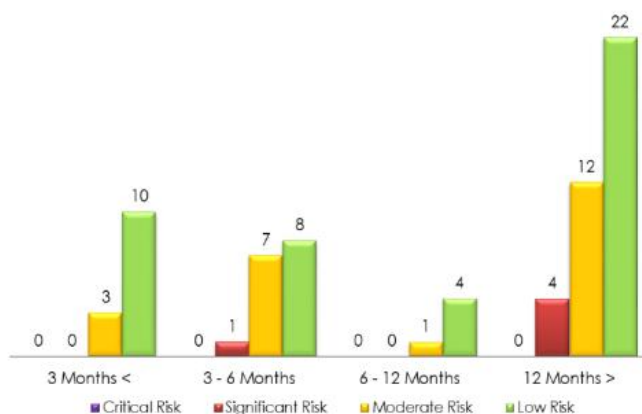
#### Recommendations

Recommendations Currently Open



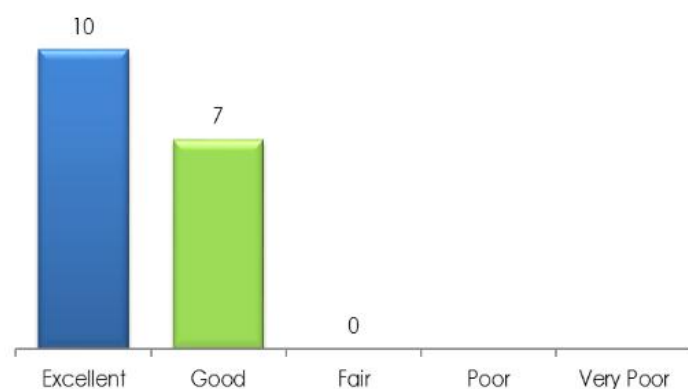
#### Recommendations

Overdue Recommendations



#### Customer Satisfaction

Customer Satisfaction Scores Oct 20 to Oct 21



## Derby City Council – Audit Progress Report

## AUDIT PLAN

## Progress on 2021/22 Audit Assignments

The following table provide Audit and Governance Committee with information on how ongoing audit assignments were progressing as at 30<sup>th</sup> September 2021.

2021-22 Jobs	Status	% Complete	Assurance Rating
<b>Policy, Insight &amp; Communications</b>			
Recovery Plan - Corporate	Allocated	0%	
<b>People Services</b>			
Carelink	Draft Report	95%	
Care Act 2014	In Progress	15%	
Safeguarding & Domestic Abuse	Allocated	5%	
Payments for Children's Social Care 2021-22	Allocated	0%	
Direct Payments 2021-22	Draft Report	95%	
Demand Management	In Progress	60%	
<b>Corporate Resources</b>			
Contract & Project Audit Assurance	In Progress	30%	
Contract Management - Data Analytics	In Progress	20%	
Accounts on Deposit	Draft Report	95%	
Grant Certification 2021-22	In Progress	50%	
Financial Management System Project	In Progress	10%	
CIPFA Financial Management Code	Allocated	0%	
Health & Wellbeing	Final Report	100%	Substantial
SIRO/Information Governance	In Progress	10%	
Leaver Data Matching	Draft Report	95%	
Digital By Default Project	Allocated	0%	
Digital Workforce	In Progress	25%	
Domain Password Security 2021-22	In Progress	55%	
Compliance with Grievance Policy	Complete	100%	N/A
<b>Communities &amp; Place</b>			
Catering - Cash & Bank Process	Allocated	0%	
Leisure Centres	Allocated	0%	
Trading Standards & Environmental Health	Allocated	5%	
Community Safety	Allocated	0%	
Land Drainage & Flood Control	Allocated	0%	
Transforming Cities /Mobility Programme	Allocated	0%	
Better Together Approach	Allocated	0%	
Sinfin Waste Plant	In Progress	60%	
Rough Sleeping & Foodbanks	In Progress	25%	
Becketwell Project	Final Report	100%	Substantial
Former Aida Bliss Site Project	Draft Report	95%	
Strategic Housing	In Progress	70%	
SmartParc Project	In Progress	50%	
Bed & Breakfast Framework	Final Report	100%	Reasonable
Leisure & Business Development 2021-22	Complete	100%	N/A
<b>Schools</b>			
Schools SFVS Contingency (11 School visits planned)	Allocated	10%	

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B/Fwd Jobs	Status	% Complete	Assurance Rating
<b>People Services</b>			
Pre-Paid Cards	Final Report	100%	Reasonable
School Financial Irregularities	Final Report	100%	N/A
School Whistleblowing - Expenses	Final Report	100%	N/A
<b>Corporate Resources</b>			
Project Delivery - Fact Finding	Complete	100%	N/A
Budget Management	Draft Report	95%	
Payment Systems - Impact of Covid 19	In Progress	80%	
Procurement Cards 2020/21	Final Report	100%	N/A
Financial Reporting - Impact of Covid19	Draft Report	95%	
Democratic Services - Impact of Covid 19	Final Report	100%	Reasonable
Insurance 2020-21	Draft Report	95%	
SR5 - Non-complaint condition of council properties	Final Report	100%	
SR8 - Poor Data and Records Management	Final Report	100%	N/A
Microsoft 365 Security	Final Report	100%	Reasonable
Boundary Defence	In Progress	60%	
Corporate Resources - Risk Management	Final Report	100%	
<b>Communities &amp; Place</b>			
Business Continuity - Impact of Covid 19	In Progress	15%	
Neighbourhood Boards	Final Report	100%	Reasonable
Section 106 Agreements 2020-21	In Progress	90%	
Derby Arena Car Parks	Final Report	100%	Limited
<b>Schools</b>			
Schools SFVS Self Assessment 2020-21	Final Report	100%	Reasonable
Schools SFVS (4 Schools – 1 Substantial, 3 Reasonable)	Final Report	100%	Various

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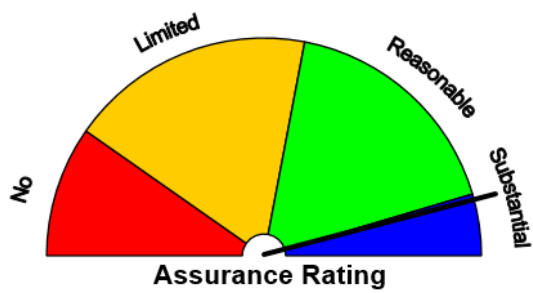
## AUDIT COVERAGE

## Completed Audit Assignments

Between 9th July 2021 and 14th October 2021, the following audit assignments have been finalised since the last Progress Report was presented to this Committee.

Audit Assignments Completed in Period	Assurance Rating	Recommendations Made				% Recs Closed
		Critical Risk	Significant Risk	Moderate Risk	Low Risk	
Health & Wellbeing	Substantial				4	0%
Becketwell Project	Substantial				2	100%
Bed & Breakfast Framework	Reasonable			4	3	0%
Corporate Resources - Risk Management	Reasonable				7	0%
SR5 - Non-Compliant Condition of Council Properties	N/A					n/a
Procurement Cards 2020/21	N/A					n/a

The opinions provided within the audits detailed below have been derived from risk-based audit work and as such, can only provide assurance relating to the specific areas within each objective inspected. These opinions do not imply that Internal Audit have reviewed all risks, controls and governance arrangements relating to this area. Likewise, full implementation of all agreed actions is essential if the benefits of the control improvements detailed in this audit report are to be realised. No system of control can provide absolute assurance against material misstatement or loss, nor can Internal Audit give absolute assurance.

Health & Wellbeing					
Control Objectives Examined		Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
Strategy, Policy, procedures and guidance documents are available that direct and monitor implementation of the Empowered Colleagues outcomes within the Council's Recovery Plan.		6	4	1	1
There are arrangements and processes in place that are designed to achieve the outcomes and outputs identified in the Recovery Plan.		5	3	0	2
There are arrangements in place for identifying and mitigating the risks to the successful implementation of the expected outcomes and outputs identified in the Recovery Plan.		8	7	0	1
<b>TOTALS</b>		<b>19</b>	<b>14</b>	<b>1</b>	<b>4</b>
Summary of Weakness			Risk Rating	Agreed Action Date	
Implementation of tasks and progress towards actions outlined in the Human Resource & Organisational Development Business Plan that will secure delivery of the staff health and			Low Risk	31/03/2022 Future Action	

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wellbeing aspects of the Derby Recovery Plan had not been reported through a recognised forum to measure delivery of the Plan.		
The detail of the outcome relating to “Fewer working days lost to sickness absence, including the average number of days lost due to stress/anxiety” was not clear. The parameters for measuring colleague absence through sickness were not stated.	Low Risk	31/10/2021 Future Action
The detail of the outcome relating to ‘Colleagues feeling motivated, informed and engaged’ was not clear. There was an absence of guidance on how engagement and motivation might be measured and success determined, ‘Our engagement activity’, mentioned in the outcome, was not defined and responsibilities for delivery were not explicit. Surveys or other work to measure staff motivation and engagement had not been undertaken since November 2020, before publication of the Recovery Plan.	Low Risk	31/10/2021 Future Action
Actions to implement a control identified to mitigate risks associated with staff health and wellbeing had been delayed.	Low Risk	31/03/2022 Future Action

Becketwell Project		<p>Assurance Rating</p>		
Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
Projects are selected with the appropriate documentation and governance in place from the start	9	6	3	0
Officers are appointed for the project to ensure adequate monitoring and management throughout	7	5	2	0
The gateway process is followed with appropriate approval at the relevant stages with documentation available	5	5	0	0
<b>TOTALS</b>	<b>21</b>	<b>16</b>	<b>5</b>	<b>0</b>
<b>Summary of Weakness</b>		<b>Risk Rating</b>	<b>Agreed Action Date</b>	
There was no clear record of approval by the Project Board of the Full Business Case for the Becketwell Regeneration project.		Low Risk	Implemented	
Interests were not being declared by Council Officers, Members or Contractors when attending meetings and there was not a Register of Declarations of Interest for the project.		Low Risk	Implemented	

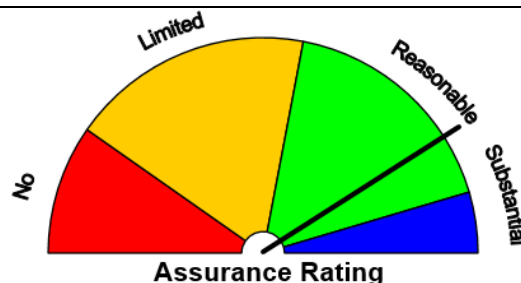
Bed & Breakfast Framework		<p>Assurance Rating</p>		
Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
To ensure the appropriate governance and collaborative working arrangements have been established between the Council and Derby	7	0	4	3



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Homes to facilitate the procurement and contract management of the emergency bed and breakfast framework.				
<b>TOTALS</b>	<b>7</b>	<b>0</b>	<b>4</b>	<b>3</b>
<b>Summary of Weakness</b>	<b>Risk Rating</b>		<b>Agreed Action Date</b>	
There was a disjointed approach to managing the holistic costs for emergency bed and breakfast accommodation services and a lack of budget and contract management.	Moderate Risk		28/02/2022 Future Action	
A joint responsibility for managing the process and monitoring the demand for emergency bed and breakfast accommodation to prevent homelessness was not designated to a single point of reference.	Low Risk		28/02/2022 Future Action	
No routine management information was produced that evidenced that the overall demand and the cost for emergency bed and breakfast services acquired across the Council and Derby Homes was monitored and effectively scrutinised.	Moderate Risk		28/02/2022 Future Action	
The budget holder responsibility for the cost centre 6000084 Housing Options was inappropriately allocated to the Head of Strategic Housing and not the relevant Head of Service who was responsible for the operational activity and financial management of the Housing Options team and Homelessness.	Low Risk		28/02/2022 Future Action	
The costs incurred for emergency bed and breakfast services were charged inconsistently across the different cost centres to various subjective codes making it problematic to identify and monitor levels of spend to ensure that the Council was adhering to procurement regulations.	Low Risk		28/02/2022 Future Action	
The Council's approach to the budget management of the emergency bed and breakfast accommodation services was fragmented with significant levels of spend that exceeded the contract value of the framework agreement.	Moderate Risk		30/09/2021 Future Action	
The contract manager role had not been formally assigned to a designated officer responsible for managing the emergency bed and breakfast accommodation framework agreement.	Moderate Risk		28/02/2022 Future Action	

## Corporate Resources - Risk Management



Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The Risk Management Framework (Strategy & Policy) complies with best practice and allows the council to effectively identify, evaluate and control risk whilst also outlining the definition of key terms such as the Council's risk appetite.	10	1	4	5
The Strategic Risk Register reflects the process outlined in the Risk Management Framework and appropriately monitors the key risks highlighted as a result of this.	8	4	2	2
Directorate Risk Registers are consistent with the Corporate Risk Management Framework and the risks identified complement the Corporate Risk Register while also covering key risks within the directorate.	8	5	2	1
Directorate Risk Registers are appropriately monitored by senior management, with responsibility being taken for all identified risks along with an appropriate strategy for handling each risk.	7	4	1	2



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TOTALS	33	14	9	10
Summary of Weakness	Risk Rating		Agreed Action Date	
Risk tolerance was not clearly defined in the revised Risk Management Strategy or Revised Risk Management Handbook, both published in November 2020, and the difference between risk tolerance and risk target score was not explained.	Low Risk		31/12/2022 Future Action	
The revised Risk Management Handbook, published in November 2020, was unclear in its explanation of risks, indicating that only those relating to the delivery of objectives should be considered.	Low Risk		31/12/2022 Future Action	
The risk appetite was not clearly defined in the revised Risk Management Strategy. There was no distinction made between the risk appetite and risk tolerance.	Low Risk		31/12/2022 Future Action	
The risk maturity level of the Council was not clearly evidenced or being regularly assessed.	Low Risk		31/12/2022 Future Action	
Mitigating actions did not have clear action dates and were not clearly prioritised as to their overall effect on the risk as outlined in the revised Risk Management Handbook.	Low Risk		31/12/2021 Future Action	
There was limited evidence that early warning indicators had been considered as part of the risk management process and discussion with Risk Champions further confirmed this.	Low Risk		31/12/2021 Future Action	
Directorate Risk Registers were only made available to Senior Management and officers involved in the risk management process.	Low Risk		31/12/2021 Future Action	

### Strategic Risk 5 - Non-Compliant Condition of Council Properties (Assurance Rating: N/A)

We undertook a consultancy review of Strategic Risk 5 – Non-Compliant Condition of Council Properties to establish if the risk information contained in the strategic risk register gave assurance that the controls were working as intended to manage/mitigate the risk as defined. The review also looked at the accuracy of the description compared to the risk being faced and whether the controls as defined were the controls that were actually in place. The audit did not review corporate risk methodology, nor did it look at any risk management activity within the department beyond that set out in the Strategic Risk Register.

From a review of the information held on the Strategic Risk Register for Strategic Risk 5 (SR5) we identified that the following areas could be improved upon:

- The title and description of Strategic Risk 5 in the Strategic Risk Register was not an accurate portrayal of the risk faced, nor would the documented controls mitigate the risk described in the Risk Register.
- There was no evidence that the processes for managing Strategic Risk 5 were embedded and/or dynamic.

### Procurement Cards 2020/21 (Assurance Rating: N/A)

The responsibility for monitoring procurement cards at the Council recently transferred from the Procurement team to the Business Support team. We have undertaken a consultancy review to ensure that robust processes have been established to manage procurement cards within the Council and that appropriate monitoring arrangements were also in place. We have advised on any gaps in procedures or areas where these can be improved upon, ensuring consistency with any policies in place.

From a review of the existing policies and discussions with relevant officers we identified the following opportunities that could be explored to assist with the monitoring and management of procurement cards:

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- Update the Purchasing Card System Policy currently in place to be consistent with actual Council policies and procedures.
- Evaluate the business need for teams/ divisions with more than one procurement card available to them to streamline the process.
- Seek to collate card application forms and approval records from Procurement and Business Support's records into a centralised location accessible by both teams.
- Look to enforce the prompt submission of transaction logs by cardholders, utilising the revised policy, to ensure that robust reconciliations can be undertaken.
- Explore the use of data analytics from the Lloyds banking group in order to better identify card misuse.
- Determine a global list of merchant category exclusions, applicable to all cards, and look to standardise this across the Council.
- Enforce the use of the corporate Amazon Prime account as opposed to individual cardholder accounts.
- Utilise the business analytics built into the corporate Amazon Prime account to identify potential item category's that could be covered under a corporate contract.

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RECOMMENDATION TRACKING (as at 14<sup>th</sup> October 2021)

Final Report Date	Audit Assignments with Open Recommendations	Assurance Rating	Recommendations Open		
			Action Due	Being Implemented	Future Action
Peoples					
27-Nov-19	Deprivation of Liberty	Limited		2	
27-Apr-21	Pre-Paid Cards	Reasonable	2		2
14-May-20	Billing for Home Care	Reasonable		1	
16-Jun-21	School Whistleblowing - Expenses	N/A	2		
Corporate Resources					
24-Mar-21	Fixed Assets 2018/19	Limited	2		
15-Apr-19	Public Utilities Management	Limited		1	
30-Mar-21	Controlled Use of Administrative Privileges	Reasonable		5	
22-Apr-21	Microsoft 365 Security	Reasonable		2	2
31-Mar-21	People Management	Reasonable	3		1
27-Mar-20	Agency Spend and Contract Monitoring	Reasonable		1	
20-Feb-20	Domain Accounts	Reasonable		1	
21-Nov-19	Digital Channels - Firmstep	Reasonable		1	
04-Oct-21	Corporate Resources - Risk Management	Reasonable			7
24-Apr-19	Document Management & Network Printing	Reasonable		2	
30-Jul-18	File Share Management	Reasonable		4	
18-Jan-19	MTFP(Agile)	Reasonable		1	
12-Feb-19	Fixed Assets- S24 Capital Controls	Reasonable		1	
25-Mar-19	Insurance Valuation	Reasonable	1		
09-Mar-20	Welfare Reform Reserve	Substantial	2		
27-Sep-21	Health & Wellbeing	Substantial			4
24-Feb-21	Asbestos Removal Contract Management	Substantial	2		
22-Sep-20	Creditors - Follow Up	Substantial		1	
10-Dec-20	Attendance Management - First Care	Substantial		3	
09-Apr-20	Taxation	Substantial	1		
16-Aug-21	Domain Password Security 2021-22	N/A			3
23-Feb-21	Revenues Data Security Risk	N/A			1
30-Mar-21	Domain Password Security	N/A		1	1
Communities & Place					
13-Jul-20	Bus Station - Processes & Procedures	Limited		6	
16-Jan-20	Bereavement Services	Limited		3	
14-Jun-21	Derby Arena Car Parks	Limited	1		4
24-Sep-19	Catering 2019-20	Limited		1	
10-Aug-21	Bed & Breakfast Framework	Reasonable	1		6
19-Apr-21	Neighbourhood Boards	Reasonable		4	1
30-Sep-20	Strategic Housing - Disabled Facilities Grants	Reasonable	2		2
13-Feb-19	Bus Station Recharges	Reasonable		4	
10-Oct-19	CCTV - Access Control - Parking	N/A		4	
10-Oct-19	CCTV - Access Control - Public Protection	N/A		4	
		Totals	19	53	34

**Action Due** = The agreed actions are due, but Internal Audit has been unable to ascertain any progress information from the responsible officer.

**Being Implemented** = The original action date has now passed, and the agreed actions have yet to be completed. Internal Audit has obtained status update comments from the responsible officer and a revised action date.

**Future Action** = The agreed actions are not yet due, so Internal Audit have not followed the matter up.

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Audit Assignments with Recommendations Due	Action Due			Being Implemented		
	Significant Risk	Moderate Risk	Low Risk	Significant Risk	Moderate Risk	Low Risk
<b>Peoples</b>						
Deprivation of Liberty					2	
Pre-Paid Cards			2			
Billing for Home Care					1	
School Whistleblowing - Expenses			2			
<b>Corporate Resources</b>						
Fixed Assets 2018/19		2				
Public Utilities Management						1
Controlled Use of Administrative Privileges					2	3
Microsoft 365 Security					1	1
People Management		2	1			
Agency Spend and Contract Monitoring					1	
Domain Accounts						1
Digital Channels - Firmstep						1
Document Management & Network Printing					1	1
File Share Management						4
MTFP(Agile)					1	
Fixed Assets- S24 Capital Controls						1
Insurance Valuation			1			
Welfare Reform Reserve			2			
Asbestos Removal Contract Management			2			
Creditors - Follow Up						1
Attendance Management - First Care						3
Taxation			1			
Domain Password Security					1	
<b>Communities &amp; Place</b>						
Bus Station - Processes & Procedures				2	2	2
Bereavement Services				2		1
Derby Arena Car Parks			1			
Catering 2019-20					1	
Bed & Breakfast Framework		1				
Neighbourhood Boards				1	1	2
Strategic Housing - Disabled Facilities Grants			2			
Bus Station Recharges						4
CCTV - Access Control - Parking						4
CCTV - Access Control - Public Protection					4	
		<b>5</b>	<b>14</b>	<b>5</b>	<b>18</b>	<b>30</b>

It is the responsibility of the Head of Internal Audit to bring to this Committee's attention any recommendations where management actions have not been effectively implemented within a reasonable timeframe. It is suggested that the following timescales are introduced.

- Critical Risk and Significant Risk recommendations – where management's original action date is exceeded by over 3 months.
- Moderate Risk recommendations – where management's original action date is exceeded by over 6 months.
- Low Risk recommendations – where management's original action date is exceeded by over 12 months.

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Recommendations To Highlight to Committee	Moderate Risk				Significant Risk			
	3 Months <	3 - 6 Months	6 - 12 Months	12 Months >	3 Months <	3 - 6 Months	6 - 12 Months	12 Months >
<b>Peoples</b>								
Deprivation of Liberty				2				
Billing for Home Care			1					
<b>Corporate Resources</b>								
Fixed Assets 2018/19		2						
Controlled Use of Administrative Privileges	1	1						
Microsoft 365 Security		1						
People Management		2						
Agency Spend and Contract Monitoring				1				
Document Management & Network Printing				1				
MTFP(Agile)				1				
Domain Password Security	1							
<b>Community &amp; Place</b>								
Bus Station - Processes & Procedures				2				2
Bereavement Services								2
Catering 2019-20				1				
Bed & Breakfast Framework	1							
Neighbourhood Boards		1				1		
CCTV - Access Control - Public Protection				4				
	3	7	1	12		1		4

### Highlighted Recommendations

The implementation of audit recommendations has been impacted by the Covid19 pandemic. The following update is provided for the Committee's information.

### Significant Risk Recommendations (> 3 Months Overdue)

There are currently five significant risk recommendations that are overdue for implementation; all five of these currently exceed three months.

- Two relate to the Bus Station – Processes & Procedures audit. One concerns an issue that the toilet turnstiles did not record either the cash inserted or the number of users, therefore a reconciliation of the cash counted to amount that should have been collected could not be performed. The second concerns the control process designed around the daily cashing up and paying in process being poorly conceived and key control processes were not being performed in an appropriate manner. Since the revised action date of 31st March 2021 was agreed for both recommendations, we have received no further updates on progress with implementation, despite sending requests.
- Two relate to the Bereavement Services audit. Regarding the recommendation on having a contract for maintenance, this is being progressed with the supplier (Faculatieve Technologies Ltd) and Procurement and Legal. In respect of the recommendation on the replacement programme for the cremators at Markeaton Crematorium, the Service Director is working on developing the business case.
- One relates to the Neighbourhood Boards audit which found that there was no clear record of the decisions made by Members outside the normal Neighbourhood Board/Ward Committee meeting cycle. It was agreed that guidance would be written outlining the process. This would be referenced in the Board and Forum guidance. A "caretaking arrangement" for this area

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has been agreed with Derby Homes and they are carrying out a root and branch review of the area for the Strategic Director of Communities and Place.

### Moderate Risk Recommendations (> 6 Months Overdue)

There are currently 23 moderate risk recommendations that are overdue for implementation. thirteen of these exceed the original action date by 6 months. The table below outlines the current state on these 13 recommendations. The Chair and the Head of Internal Audit will advise the Committee at the meeting on any actions that need to be taken in respect of these recommendations.

Audit Review	No of Recs overdue	Original Action Date	Revised Date	Reason for Delay
Deprivation of Liberty	2	01/07/2020 & 01/10/2020	31/03/2022 & 31/03/2022	<p>The recommendations concerned:</p> <ul style="list-style-type: none"> <li>There was no policy that detailed the roles and responsibilities of the Council and other relevant parties during the deprivation of liberty process.</li> <li>There was a lack of guidance and clarity for storing documents. There was no clear indication of how long documents should be kept for each type of circumstance.</li> </ul> <p>The progress in implementing the required actions has been slower than anticipated due to staff shortages, COVID pandemic responses and delays in implementation of a new electronic document management system.</p>
Billing for Home Care	1	31/12/2020	31/12/2021	<p>The audit found that there were a number of errors in the way that information was interpreted or transferred between the financial assessments and their corresponding Contribution Letters.</p> <p>Random sample checks of assessments have been introduced and work continues on the on-line financial assessment tool.</p>
Agency Spend and Contract Monitoring	1	30/04/2020	31/11/2021	<p>The audit identified that there was off contract spending for agency staff that was not covered by another compliant contract or by a contract waiver.</p> <p>We are still awaiting further evidence in support of the action as it is not clear as to whether the issue has been fully addressed.</p>

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Audit Review	No of Recs overdue	Original Action Date	Revised Date	Reason for Delay
Document Management & Network Printing	1	31/07/2019	31/10/2021	<p>The audit found that access was not restricted to the second-floor storage room (Council House) used for archiving documents, with no process in place to identify who had been inside the room.</p> <p>An approach has been agreed and all sensitive documents/boxes held will now be stored off-site or locked away in appropriate cupboards with restricted access. The transfer and full implementation of the actions has been paused due to the COVID-19 situation and the current remote working arrangements for the service. It is expected that when the Council House is open for 'business as usual' activities all remaining actions will be completed.</p> <p>The revised action date of 31/10/21 was based on the assumption that the service would have resumed in the Council House again rather than working from home.</p>
MTFP	1	30/06/2019	30/06/2021	<p>The recommendation aimed to address the Council not having a Commercial Strategy, although there was an outstanding action in the Corporate Improvement Plan to implement a commercial approach. There was also no clear indication on how a commercial approach would support the Medium-Term Financial Plan.</p> <p>Development of a corporate commercial approach is a programme/project within the Council's "Smarter Working" Outcome Plan. There is a commitment to publish a commercial approach which sets out the Council's approach to innovation and enterprise.</p>
Bus Station - Processes & Procedures	2	31/08/2020	31/03/2021	<p>Two recommendations were made around non-compliance with the Council's cash handling procedures in respect of cashiers cashing up and reconciling their own tills without supervision and with regard to the storage of safe keys.</p> <p>The implementation of these two</p>



## Derby City Council – Audit Progress Report

Audit Review	No of Recs overdue	Original Action Date	Revised Date	Reason for Delay
				recommendations is tied in with the implementation of the two significant risk recommendations mentioned on page 13.
Catering 2019-20	1	31/01/2020	30/07/2021	This area has been subject to recent audit work (Leisure and Business Development).
CCTV - Access Control - Public Protection	4	31/10/2019	31/12/2020	<p>The audit assessed the systems in place to manage the Council's CCTV networks against the 12 Principles in the Home Office Surveillance Camera Code of Practice. These four recommendations concerned weaknesses identified in access to CCTV images, responsibility for the servers holding the images, quality of the images produced and responsibility for the overall management of the CCTV function.</p> <p>A CCTV Improvement Board was set up to review and address all the issues raised in this audit. Internal Audit is aware that the Head of Service - Trading Standards, Food and Safety, Bereavement Services and Building Consultancy has been given the CCTV project to undertake a review / scope etc. No further updates have been received on when the recommendations will be implemented.</p>

### Low Risk Recommendations

There are currently 44 low risk recommendations that are overdue for implementation. Of these 44, 22 exceed 12 months, and in 19 of these cases Internal Audit has agreed a revised implementation date. Of the remaining three, one relates to the Insurance Valuation of Heritage assets and Museum collections where we are waiting on an update and two relate to Welfare Reform Reserve where again we are waiting on an update. None of these low-risk recommendations are currently considered worthy of Committee's attention.