

AGENDA ITEM: 7

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Meeting	Audit Committee
Date	17 February 2011
Subject	Audit Recommendations – 2009/10
Report of	Assistant Director of Finance - Audit and Risk Management
Summary	Members are asked to note the progress against internal audit recommendations raised during 2009-10 and progress against the external audit report on the One Barnet programme.

Officer Contributors	Assistant Director of Finance - Audit and Risk Management
Status (public or exempt)	Public
Wards affected	None
Enclosures	Appendix A - Internal Audit Recommendations
For decision by	Audit Committee
Function of	Council
Reason for urgency / exemption from call-in (if appropriate)	Not applicable

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1. RECOMMENDATIONS

- 1.1 That the Committee note the contents of the Report and the actions being taken to address some cases of non implementation of recommendations. In addition, the Committee is asked to note the progress against the External Audit recommendations from their One Barnet audit, as updated by officers.

2. RELEVANT PREVIOUS DECISIONS

- 2.1 None, this paper was prepared at the request of the Chairman.

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

- 3.1 All internal audit planned activity is aligned with the Council's objectives, particularly the "Better Services with Less Money" priority, and, thus, supports the delivery of those objectives by giving an auditor judgement on the effectiveness of the management of the risks associated with delivery of the service.

4. RISK MANAGEMENT ISSUES

- 4.1 All Internal Audit activity is directed toward giving assurance about risk management within the areas examined. By so doing the aim is to help maximise the achievement of the Council's objectives. Internal Audit does this by identifying areas for improvement and agreeing actions to address the weaknesses.
- 4.2 Internal Audit work contributes to increasing awareness and understanding of risk and controls amongst managers and thus, leads to improving management processes for securing more effective risk management.

5. EQUALITIES AND DIVERSITY ISSUES

- 5.1 Effective systems of audit, internal control and corporate governance provide assurance on the effective allocation of resources and quality of service provision for the benefit of the entire community. Individual audits assess as appropriate the differential aspects on different groups of individuals.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

- 6.1 When risk, and assurances that those risks are being well managed, is analysed alongside finance and performance information it can provide management with the ability to measure value for money.

7. LEGAL ISSUES

- 7.1 No legal issues in the context of this report.

8. CONSTITUTIONAL POWERS

- 8.1 The Constitution Part 2 Paragraph 3.3 recognises that the annual audit opinion plays an essential part in advising the Council that risk management procedures and processes are in place and operating effectively.

9 BACKGROUND INFORMATION

- 9.1 This report lists all the priority 1 (high) recommendations raised from the internal audits carried out in 2009-10 and the first two quarters of 2010/11, and notes the progress directorates have made addressing these areas of weakness. Where some recommendations have been part implemented or not implemented a response and revised implementation dates has been agreed with officers. The recommendations where action is still required will continue to be reported to the Audit Committee until the action has implemented.
- 9.2 In addition, the Audit Committee has requested to be updated on the position with the external audit recommendations in regards to the One Barnet review carried out in 2009/10. Progress against these recommendations has been provided by officers in Appendix B.

10. LIST OF BACKGROUND PAPERS

- 10.1 None.

Legal: MM
Finance: JH/MC

Summary of 2009/10 & 2010/11 Limited or No Assurance Internal Audit Reports (priority 1)

The following is a table of all priority 1 recommendations raised during 2009-10 and the first two quarters of 2010/11. These have been rated as either: red (not implemented), amber (partly implemented) and green (fully implemented). Auditors have assessed the evidence from officers in order to give this update position. All recommendations relating to the audit of schools within the Borough have not been included as all recommendations had been implemented.

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
Treasury Management	<p>Risk: Counter Party Credit Ratings There is a risk of significant financial loss resulting from Council investments with a counterparty which no longer has an acceptable financial rating</p>	<p>Agreed. The report issued each Friday (see above) shows the credit rating of the outstanding deposits. Weekly reports giving the same information from the Independent Investment Advisors are also kept on file.</p>	Treasury Manager	Immediate
	<p>Risk: Recording of Investments Made There is a risk of in appropriate investment if transactions which do not comply with the Treasury Management Strategy are not identified as a result of ineffective segregation of duties and management review of the investments made.</p>	<p>Agreed. The “yellow” cards referred to in the main body of the report have been replaced with the dealing ticket system. These not only give the name of the officer who did the deal but are also counter signed by the Treasury Manager for compliance with the strategy.</p>	Treasury Manager	Immediate

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>Risk: Management Reporting Systems – Compliance There is a risk of financial loss through the failure to identify non compliance to the Treasury Management Strategy, transactional inefficiencies and process failures in a timely manner.</p>	<p>Action as per Risk 2. No further action to be taken.</p> <p>The Treasury Team do not expect Butlers to check for compliance and to their knowledge never have. Compliance is dealt with in the weekly / monthly quarterly reporting detailed in point 2 above.</p>	<p>Head of Finance – Capital & Treasury</p>	<p>Immediate</p>
<p>Section 106 Payments</p>	<p>Risk: Adoption of Supplementary Planning Documents There is a risk of not optimising S106 income and therefore benefit to the community resulting from uncertainty and confusion for both developers and the Council over the range of obligations and the levels of contributions that would be sought in the absence of adopted SPDs.</p>	<p>The local development scheme is currently being revised and the new scheme for delivery of the LDF will be taken to members in January 2010 to set out:</p> <ul style="list-style-type: none"> - Titles of the Supplementary Planning Documents (SPDs) that will be undertaken and - The timeframe for delivering them. <p>We will know by 1st April 2010 (when CIL regulations are published, but hopefully sometime beforehand) which community needs are to be included under the CIL charging schedule and which under SPDs.</p> <p>In the interim, a guidance note will be produced for planning officers on when negotiating for certain contributions is</p>	<p>Head of Strategy: (Planning & Housing)</p> <p>Head of Strategy: (Planning & Housing)</p> <p>Head of Planning and Development Management</p>	<p><u>Partly Implemented</u></p> <p><u>Further Action agreed:</u> -Section 106 guidance to be reviewed. -Development of the Infrastructure, Planning and Growth Officer role.</p> <p><u>Revised Implementation Date:</u> <u>April 2012 (In line with Mayor's</u></p>

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		appropriate. This will be supplemented by Service Level Agreements with departments to ensure effective planning consultations.		<u>deadline and Statutory requirements)</u>
	<p>Risk: Policy on Condition Application There is a risk of legal challenge from the use of Conditions on the grounds that it may be unlawful on the part of the Council to require Conditions to be met, particularly where an applicant only submits details of the requirement without a payment and the application refused subsequently.</p>	Advice will be sought from Legal to review and confirm that the process is robust and that a policy position is formally established.	Planning Obligations Officer	<u>Implemented</u>
	<p>Risk: Verification Activated of S106 agreements There is a risk of not maximising income and cash flow to the Council, particularly in the current economic downturn, in the absence of an effective process for verifying activated S106 agreements.</p>	<p>A full appraisal of all development sites listed as currently 'untriggered' or 'requiring a visit' will be completed in December 2009.</p> <p>A review of the roles and responsibilities will undertaken, see risk 5, which will establish and enable more active monitoring at regular intervals.</p>	Planning Obligations Officer	<u>Implemented</u>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>Risk: Income Collection Risk: Risk: Procedures</p> <p>There is a risk that the Service may not be able to effectively avoid the costs associated with collecting income through unapproved collection methods i.e. invoicing cost, staff costs, arrears management, risk of bad debts, etc in the absence of an agreed policy for collecting s106 contributions.</p> <p>Where efficient income collection processes are not utilised, i.e. through use of SAP, there is a risk that income may not be collected on a timely basis or at all, thus resulting in additional and unnecessary tasks being carried out by Officers.</p> <p>There is a risk of errors, financial loss and possible fraud or misappropriation of income, in the absence of clear separation of duties for the collection, recording and preparing banking of income received by the service.</p>	<p>A full review of s106 income collection procedures will be undertaken and therefore these issues will need to be discussed with the Chief Finance Officer in liaison with legal services to ensure appropriate procedures are established that minimise this risk.</p>	<p>Head of Planning and Development Management</p>	<p><u>Partly Implemented</u></p> <p>Further Action required: -Development of income collection procedures on SAP. -Documenting the reconciliations performed for income collection.</p> <p>Revised Implementation Date:</p> <p>To be decided by Cabinet in March 2011</p>

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	<p>Risk: Debt Monitoring In the absense of an effective process for manageing (including debt write-offs), analysing and reporting debt there is a risk loss of income and poor cashflow resulting from debts not being paid or not paid on time.</p>	<p>Process and indicators for monitoring debt will be established as part of the meeting with the Chief Finance Officer, see Risk 12.</p> <p>Debt monitoring information will be produced by the Planning Obligations Officer and overview provided by line management.</p>	<p>Infrastructure Planning Manager</p> <p>Planning Obligations Officer</p>	<u>Implemented</u>
Appointeeship	<p>Risk: Policies & Procedures There is a risk of inefficient, ineffective or non compliant working practices. This may lead to failure to achieve desired outcomes, poor value for money and non compliance with legislation.</p>	<p>Agreed. The service will develop policies and procedures which will cover areas of processes, roles and responsibilities in consultation with other appropriate teams/officers.(Supply Management/Care Management)</p>	<p>Customer Financial Manager</p>	<p>April 2010</p>
	<p>Risk: Assessment of Clients There is a risk that clients may be assessed incorrectly and that the Council may be subject to legal challenge.</p>	<p>Agreed. Customer Financial Manager will liaise with Care Management to confirm how clients are assessed to determine whether they are unable to manage their finances, including the documentation to be retained to evidence this assessment, the timescales/triggers within which to undertake the assessment and the independent management review of the social worker's assessment to verify the accuracy and validity.</p>	<p>Customer Financial Manager</p>	<p>April 2010</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>Risk: Referrals Where referrals are incomplete, inaccurate or not actioned in a timely manner, there is a risk that clients' safety is compromised (e.g. financial abuse cases) and of the Council failing to demonstrate duty of care and due diligence</p>	<p>Agreed. Service will develop documented referral criteria, which includes who are eligible for appointeeship. Standard referral form has been drafted and will be used by Service for referrals to ensure that only clients who have been assessed as requiring assistance in managing their finances as well as meeting the appointeeship service referral criteria are accepted.</p> <p>The possibility of highlighting residential care service users who become appointeeship clients on SWIFT (or software used by Deputyship Administration Team) will be explored and the use of the spreadsheet maintained by the Appointeeship Administrator will be reviewed as part of this exercise. This will also assist in ensuring that referrals are not missed or not processed in a timely manner.</p> <p>We will reconcile existing clients with those on SAP</p>	Customer Financial Manager	April 2010
	<p>Risk: Accounting Arrangements There is a risk of misstatement of income and expenditure figures and wastage of resources if the management accounting arrangements are not appropriate to the needs of the business.</p>	<p>Agreed. A process will be put in place to reconcile client balances (debtor and creditor accounts) as shown on SAP with bank account balances.</p> <p>The management accounting coding structure (including the need to raise multiple debits for each type of benefit</p>	Customer Financial Manager	May 2010

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		income) will be reviewed to ensure that the correct cost centres and general ledger codes are used such that income and expenditure are not overstated. Any errors will also be picked up by the relevant budget managers.		
	<p>Risk: Client Income There is a risk of inappropriate debt collection and misstatement of income figures if contracts are not raised accurately and in a timely manner. This may ultimately lead to undue hardship on clients and legal challenge.</p>	<p>Agreed. Customer Financial Manager will liaise with the Business Improvement Team to explore the possibility of reconciling SWIFT and SAP to ensure that residential care service users who are appointeeship clients have a corresponding debit representing the client contribution amount raised on SAP. This will also highlight whether the debit representing the amount repayable to the clients (personal allowance, specific benefits etc) have also been raised.</p> <p>Where the debit has not been raised or has not been raised in an accurate or timely manner, this will also be flagged by the relevant budget manager and communicated to the Appointeeship team.</p> <p>The need to have a more systematic process to check whether clients are receiving their maximum benefit entitlements will be explored and implemented if necessary.</p>	Customer Financial Manager	May 2010

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		The Customer Financial Manager will liaise with the SAP Improvement and Control team to explore the possibility of automating the annual uprating of contracts (debits representing income receivable from DWP) and Purchase Orders for the payment of personal allowance and other benefits repayable to the clients.		
	<p>Risk: Client Expenditure There is a risk of undue hardship on clients if monies due (e.g. personal allowance and DLA etc) to the clients are not paid or not paid in a timely manner. There is a risk of financial loss to the Council if payments made are not accurate or appropriate.</p>	<p>Agreed. The Customer Financial Manager (or delegated officer) will verify the accuracy and validity of the framework orders raised by Appointeeship Administrator (ideally via SAP authorisation process) to ensure that duplicate, inaccurate or untimely payment is not made. Any errors will also be picked up by the relevant budget managers and flagged up to the Appointeeship team.</p>	Customer Financial Manager	September 2010
	<p>Risk: Arrangements to prevent fraud or loss of client assets There is a risk that clients are subject to financial abuse and that the Council may not be able to demonstrate that clients' monies are being spent in their best interests and that the income is being kept safe in the interim.</p>	<p>Agreed. Appropriate processes will be put in place to ensure that the Council receives assurance that any monies passed on to third parties or back to the clients are used to meet the clients' needs. Care Management and Supply Management teams (contract Monitoring) will be consulted during the design of these processes.</p>	Customer Financial Manager	April 2010

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	<p>Risk: Performance Management There is a risk that management are not aware whether service objectives are being achieved (due to mismanagement of client funds) and whether value for money is being obtained (due to inappropriate or inadequate resource allocation) where specific performance management information is not requested or received and reviewed regularly.</p>	<p>Agreed. Appropriate PIs will be established, monitored and reported on an appropriate frequency basis to the relevant parties.</p>	<p>Customer Financial Manager</p>	<p>May 2010</p> <p>Partly implemented: - Management have identified and established appropriate PIs, but it was confirmed by the Customer Financial Manager that no monitoring framework has been developed.</p> <p>Further Action Required: A process to monitor the service PIs should be developed.</p> <p>Revised implementation date agreed: With immediate effect</p>

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Deputyship	<p>Risk: Policies & Procedures There is a risk of inefficient, ineffective or non compliant working practices. This may lead to failure to achieve desired outcomes, poor value for money and non compliance with legislation</p>	Agreed: The service will develop policies and procedures which will cover areas of processes roles and responsibilities.	Customer Finance Manager	April 2010
	<p>Risk: Assessment of Client Needs There is a risk that clients' may be assessed incorrectly and that the Council may be subject to legal challenge. There is a risk that the Council may not be able to demonstrate appropriate management of clients' finances.</p>	Agreed: We will also review existing cases, develop referral criteria. Planned service restructure will also address resource issues. Will benchmark against other local authorities (Performance Indicators and workload).	Customer Finance Manager	April 2010
	<p>Risk: Bank Reconciliation There is a risk of error going undetected where bank accounts are not regularly reconciled to the income and expenditure ledger.</p>	Agreed. Bank reconciliation process will be reviewed to ensure it is being done correctly. Un-presented cheques will be cancelled in a timely manner and clearance of the suspense account will be reviewed by management. Any adjustments made (e.g. recording of standing orders, direct debits, direct transfers etc) in Quicken during the bank reconciliation process will be dated correctly. Will develop policy of peer supervision and file audit validation checks to prime documents and Quicken.	Customer Finance Manager	April 2010

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	<p>Risk: Client Expenditure There is a risk that the Council may not be able to demonstrate that decisions have been made in the best interests of the clients. There is a risk of financial loss if payments made are not accurate, timely or appropriate.</p>	<p>Agreed. Will review process to ensure that decisions are made in best interests of client. Subject to restructure proposals, will develop policy of peer supervision and file audit validation checks to prime documents. Invoices will be recorded on the date of receipt and stamped to ensure payment is made within payment terms and conditions. Other expenditure will be recorded on the date of the decision/request from client. The possibility of developing budget plans for each client (in consultation with all relevant stakeholders such as client, social workers, family etc) to estimate and forecast income and spend will be considered. Cost effective methods of payments will be utilised to minimise wastage of resources on invoice processing, cheque runs etc.</p>	Customer Finance Manager	April 2010
	<p>Risk: Arrangements to prevent fraud or loss of client assets Where monies are passed on to third parties and the Council does not obtain assurances that the monies are being spent to meet the clients' needs, there is</p>	<p>Agreed. Appropriate processes will be put in place to ensure that the Council receives assurance that any monies passed on to third parties or back to the clients are used to meet the clients' needs. Care Management and Supply</p>	Customer Finance Manager	April 2010

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>a risk of error and fraud. There is a risk that clients are subject to financial abuse and that the Council may not be able to demonstrate that it is spending the clients' monies in their best interests and keeping the income safe in the interim.</p>	<p>Management teams (contract Monitoring) will be consulted during the design of these processes.</p>		
	<p>Risk: Performance Management This is a risk that management are not aware whether service objectives are being achieved (due to mismanagement of client funds) and whether value for money is being obtained (due to inappropriate or inadequate resource allocation) where specific performance management information is not requested or received and reviewed regularly.</p>	<p>Agreed. Appropriate PIs will be established, monitored and reported on an appropriate frequency basis to the relevant parties.</p>	<p>Customer Finance Manager</p>	<p>May 2010</p> <p>Further Action Required:</p> <p>A process to monitor the service PIs should be developed.</p> <p>Revised implementation date agreed: With immediate effect</p>
<p>Blue Badge Scheme</p>	<p>Risk: Service Delivery</p> <p>Without timely and comprehensive service reviews and establishing formal service delivery arrangements, there is a risk that service objectives may not delivered effectively and efficiently and improvements may not be identified and incorporated on time.</p>	<p>Agreed.</p> <p>We will conduct a service review which will consider relevant best practice guidance and recommendations of the Department for Transport (DfT) in order to implement effective service delivery arrangements. An action plan of changes will be identified as part of the review. Discussions will take place with</p>	<p>Assistant Director (Adults)</p>	<p>January 2010</p>

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		Environment service to determine where the service is best located which will impact on changes.		
	<p>Risk: Data Recording</p> <p>Without identifying necessary management information and statutory data requirements effectively and in the absence of robust systems for capturing information, including accurate data processing, there is a risk that necessary information may not be available to monitor service delivery effectively and that fraud or error may not be prevented or detected.</p>	<p>Agreed.</p> <p>a) Management information requirement on statutory areas and other operational areas will be identified in order to establish an effective framework of management information and reporting.</p> <p>b) Data requirements will be specified to ensure effective capturing of management information on the database system. The data base will be amended to ensure the effective capturing of data and report generation.</p> <p>c) Routine data quality checks will be implemented to ensure the accuracy and completeness of records on the database system.</p>	Assistant Director (Adults)	<p>April 2010</p> <p>Partly implemented:</p> <p>Further Action required: As per recommendation b) and c).</p> <p>Revised implementation date: 19 February 2011</p>
	<p>Risk: Processing Applications</p> <p>Without implementation of robust procedures for verification and administration of applications, there is a</p>	<p>Agreed.</p> <p>The current processes for verification and administration of applications will be reviewed in line with the service review</p>	Assistant Director (Adults)	April 2010

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	risk that blue badges may be issued to those not entitled to.	<p>and revised where necessary to ensure that blue badges are issued only to those entitled; necessary quality reviews will be implemented.</p> <p>The current application forms will be reviewed and revised in line with the best practice guidance. In addition, the revised form will seek proof of identity, address and National Insurance Number for individuals.</p> <p>Written procedures will be produced to capture the revised processes and made available to staff; relevant staff will be trained to implement the processes effectively.</p>		
	<p>Risk: Data Protection</p> <p>Without updating the declaration section on the application forms in line with the best practice guidance issued by the DfT there may be non-compliance with the Data Protection Act if data is shared for any control purpose e.g. detection and prevention of fraud.</p>	<p>Agreed.</p> <p>The current application forms will be reviewed and updated in line with the best practice guidance in respect of Data Protection.</p>	Assistant Director (Adults)	Immediate
	<p>Risk: Fraud prevention and detection</p> <p>There is a risk the service may not be able to prevent and/or detect misuse of</p>	<p>Agreed</p> <p>ASSD will liaise jointly with Parking service and CAFT to develop a formal</p>	Assistant Director (Adults)	April 2010

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	the Blue Badge scheme in the absence of robust fraud prevention and detection processes and protocols.	<p>protocol for fraud prevention and detection.</p> <p>The existing corporate approach will be identified to inform the development of a formal Fraud Prevention Strategy, and current processes and protocols will be reviewed and updated to ensure consistency with the strategy.</p>		
Contact Point	<p>Risk: Outstanding Organisation Accreditation</p> <p>While organisation accreditation remains outstanding, there is a risk:</p> <ul style="list-style-type: none"> - that the DCSF may develop negative perceptions around the implementation of ContactPoint at Barnet, - of misuse of ContactPoint should all key responsibilities not be documented for communication to all ContactPoint end users, - of inappropriate access to ContactPoint should any weaknesses, if applicable, relating to ContactPoint connectivity via the network or through inappropriate workstation configuration not 		ContactPoint Project Manager	August 2009 Implemented

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	<p>be addressed.</p> <p>An overall risk effect is that the Corporate Plan 2009/10 safeguarding theme may be compromised.</p>			
Disposals and Capital Receipts	<p>Risk: Disposal Operations</p> <p>There is a risk of financial loss without an effective and consistent disposal process and the failure to identify non compliance to specified approved practices.</p>	<p>Agreed.</p> <p>The issue of comparative advantages and disadvantages will reviewed through amendment of the Management of Real Estate and Land document to reflect the different values of disposals, and to ensure Council policy is met.</p>	Head of Asset Management	<p>April 2010</p> <p>Implemented</p>
Procurement and Contracts CS-S&SC)	<p>Risk: Governance Arrangements</p> <p>There is a risk that approved procurement objectives are not achieved and that the Council may not be able to reduce the likelihood of adverse material events if governance arrangements are not sufficiently robust.</p>	<p><u>Cabinet Member Level:</u> Major Projects Deputy Director will liaise with Democratic Services to assess whether the current portfolios include the items highlighted in the report. The Director of Corporate Governance and Director of Resources would be consulted to make the proposal to the Leader of the Council and Chief Executive thereafter if amendments are to be made.</p> <p><u>Senior Management Level:</u> Major Projects Director has delegated this task to CPT who have already started carrying out spend analysis, the outcomes of which will be reported to Major Projects</p>	<p>Deputy Director, Major Projects</p> <p>Head of Procurement</p>	<p>Implemented</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
		<p>senior management team as well as the relevant Service Areas.</p> <p><u>Officer Level:</u> CPT will continue to emphasise the need for Service Areas to have a dedicated officer who can fulfil the SAPO role via training etc. Further consideration may be given to formalise this responsibility however this is currently under ongoing review.</p>		
	<p>Risk: Performance/ Management Information Framework</p> <p>There is a risk that management decision making may be impaired and the objectives of the service may not be achieved if a comprehensive performance and management information framework is not in place.</p>	<p><u>CPT:</u> 2 Performance indicators for the CPT have now been established (Sustainability and % of compliance with CPR)</p> <p>The PIs for SAPOs (subject to line management agreement) will be discussed via the SAPO network.</p>	Deputy Director, Major Projects & Head of Procurement	Implemented
	<p>Risk: Tendering & Contractual Agreement</p> <p>There is a risk that the Council may not be achieving a fully competitive tendering environment and may be open to allegations of impropriety or penalties.</p> <p>There is a risk that the Council may not receive the service required or may be unable to recover damages if formally agreed and clearly defined contracts are</p>	<p><u>Housing:</u> The preferred list of suppliers has been used historically. We have taken steps to mitigate this risk through talking to Procurement and their subsequent drafting of a provisional procurement plan for nightly purchased TA. Talks are on-going over how we implement this change. We are currently awaiting a response from Legal with regards to the contractual</p>	Business Performance & Development Manager, Planning, Housing and Regeneration	Implemented

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	<p>not in place. There is a risk of breach of contract which may result in legal challenges and financial loss</p>	<p>documentation. <u>Planning:</u> Closer working with the CPT will ensure this will not happen in the future. Once training has been given in the procurement process procedures can be put in place to ensure all staff are correctly tendering contracts</p> <p><u>Transport:</u> Processes will be put in place to ensure compliance with the Contract Procedure Rules and waivers will be requested where appropriate.</p>	<p>Env Services Manager</p>	
	<p>Risk: Compliance with SAP Procurement Process</p> <p>There is a risk of overpayments (including duplicate payment) and budget overspend which may lead to financial loss due to the lack of commitment information and adherence to the official SAP Procurement Process.</p>	<p><u>Planning:</u> Again once the correct process is put in place, contract owners will be able to monitor effectively to ensure adherence to the official process.</p> <p><u>Revenues:</u> The official SAP procurement process will be used for all expenditure going forward.</p>	<p>Business Perf & Dev Manager, Planning, Housing and Regeneration</p> <p>Head of Revenues</p>	<u>Implemented</u>

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	<p>Risk: Creditor/Commitment analysis Priority 1</p> <p>There is a risk of poor budget monitoring if purchase orders are not recorded accurately or not monitored regularly.</p> <p>There is a risk of financial loss due to duplicate payments and penalties for late/non payments which may affect the working relationship with suppliers if invoices received are not reviewed by procuring departments.</p>	<p><u>CPT:</u> The above actions should reduce retrospective ordering of purchase orders and thereby address some of the GR/IR items</p> <p><u>Finance:</u></p> <p>Departments are reminded to check purchase orders and close any that are no longer required as part of the closure of accounts.</p> <p>The GR/IR account was reviewed in March 2009 and any outstanding balances that were no longer required were de-committed and cleared out of the GR/IR account before closing down 2008/09.</p> <p>We are currently undertaking a similar exercise in preparation for the 2009/10 closedown.</p>	Finance Manager (Closing & Monitoring)	<u>Implemented</u>
Data Security and Data Handling	<p>Risk: Leaver process</p> <p>While Service Area Managers fail to notify IS of staff leaving the Council, there is a risk that leavers may be able to access Council data after they have left e.g. remotely (if tokens have not been returned).</p>	<p>Management Comment and Action to mitigate risk</p> <p>1. Where staff leave under suspicious circumstances there is an arrangement with HR to disable the relevant leaver</p>	Head of IS and CGD Performance and OD Manager	<u>Implemented</u>

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		<p>network accounts immediately.</p> <p>2. Staff working on a temporary basis e.g. on a fixed term contract, can have the account set to automatically expire after a stipulated period.</p> <p>3. IS can and will aim to disable network accounts as soon as they are notified. IS does and will use, lists of leavers provided by HR to disable network accounts (this however may result in a time delay disabling the network account)</p> <p>4. The process for disabling leaver accounts will be supported through the completion of the SAP-HR and Active Directory (AD) synchronisation process. The development of HR-SAP and Active Directory (AD) synchronisation (which will support the leaver process and ensure/trigger automated disabling of leaver network accounts) is in progress and will be completed. (Note: Effective operation will still depend on the prompt update in SAP of leaver action).</p> <p>The process will be emphasised in procedures as part of the process mapping exercise (refer to risk 3, above).</p>		

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		<p><u>Corporate Governance Directorate</u></p> <p>4. Required practice by service managers in relation to the leaver process will be emphasised in data protection training/raising awareness arrangements.</p> <p>For instance, the Data Protection Staff Guide (approved by Directors on 5 January 2010) may be converted into leaflet form where such practices may be included for communication purposes</p>		

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>Risk: Unencrypted CD's While CD's remain unencrypted, there is a risk that data saved to this media may be easily access and misused should they be lost or stolen</p>	<p>Management Comment and Action to mitigate risk</p> <p>IS representatives confirmed that information on CD's would not be encrypted by the encryption software owing to the encryption software being incompatible with the CD writing software.</p> <p>The Head of IS will liaise with the Head of Corporate Services to reach a decision on the ongoing use of CD's as a form of storage media (as there is no apparent business case for the use of CD's) and to prevent (disable) the use of CD's as applicable.</p>	Head of IS	<p><u>Implemented</u></p>
	<p>Risk: Roles and responsibilities While Corporate roles and responsibilities and structures for data security remain unclear (so that all stakeholders are aware of which officers are responsible for related activities) there is a risk that applicable updates to policies may not be made or activities to facilitate</p>	<p>Management Comment and Action to mitigate risk</p> <p>1. Roles and responsibilities around data security in the Corporate Governance Directorate (CGD) have not been formally agreed. Roles and responsibilities will be formally approved following engagement</p>	CGD Performance and OD Manager	<p><u>Partly Implemented</u> Further Actions:</p> <p>- Roles and responsibilities around data security in the</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>implementation of policy may not be undertaken leading to a potential failure to implement the appropriate practices across the Council.</p>	<p>with the Director of Corporate Services (see below). In particular around policy update, there is still uncertainty as to how roles and responsibilities should be definitively split between IS (Director of Corporate Services) and the Corporate Governance Directorate</p> <p>2. Arrangements will be introduced to engage with the Director of Corporate Services and the relevant staff on an ongoing basis:</p> <ul style="list-style-type: none"> - to clarify roles and responsibilities around ownership of Corporate aspects of data security and - to assist with the development of the Information Strategy in relation to data protection (and the Data Protection Act) <p>4. The roles and responsibilities will be agreed and updated for the FOI Link Officers to include data protection/security aspects.</p>		<p>Corporate Governance Directorate (CGD) to be formally agreed.</p> <p>- Reconvening Information Governance Council.</p> <p>Revised Implementation Date: For Roles and Responsibilities - April 2010</p> <p>For IGC – to be confirmed but agreed with Corporate Directors Group in February 2011</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
		<p>5. Roles for monitoring compliance with policy (e.g. through self assessment) will be developed.</p> <p>6. Training and arrangements for raising awareness in the Council around data protection will be developed</p>		
	<p>Risk: Embedding arrangements in Service Areas While Corporate arrangements are outstanding, there is an overall Council wide risk of data loss or unauthorised access through an inability to embed data security arrangements and practices consistently in Services (e.g. through a lack of structures in all Services to own, raise awareness and ensure compliance with Corporate Policies addressing data security).</p>	<p>Management Comment and Action to mitigate risk</p> <p>Refer to actions agreed for risk 8 and 9, above.</p>	<p>CGD Performance and OD Manager</p>	<p><u>Partly Implemented</u></p> <p>Further Actions:</p> <ul style="list-style-type: none"> - Completion of review of IS related policies. - Roles and responsibilities around data security in the Corporate Governance Directorate (CGD) to be formally agreed. <p>Revised Implementation</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				date: March 2011 – for policy review April 2010 – for roles and responsibilities
Internal Control Checklist - Environment and Transport	Risk: ICC Reviews There is a risk that ICCs may be completed incorrectly and inaccurate assessments of the current controls are made if ICCs are not properly and independently checked for completeness and compliance with procedures.	Agreed. Meetings have been held with SMT members to further explain the significance and purpose of the ICC process. Further training on risk management has been given by the Corporate Risk Officer as requested by the Directorate. There is now a section within the Team Service Plan which makes provision to continuously monitor the ICCs so that control weaknesses/progress/risks can be followed up by the manager, performance & development team and the relevant AD. SMT members have been asked to review their ICCs and complete the ICC section of the Team Service Plan by the end of December 2009. This will provide a further opportunity to challenge/scrutinise the assessments made.	Interim AD Performance & Development or as delegated	<u>Implemented</u>
Internal Control Checklist -	Risk: Procedures There is a risk of poor control	Procedures will be reviewed and improved where necessary and briefings	Head of Research &	<u>Not implemented</u>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
<p>Children’s Service</p>	<p>assessment and therefore poor internal control environment if procedures are not adequate, clear or communicated to staff, and if officers are not trained or provided with sufficient guidance in management duties/functions/responsibilities.</p>	<p>provided on key responsibilities e.g. data protection, corporate policies etc to be rolled out.</p>	<p>Management Information</p>	<p>The procedures have not been reviewed and improved where necessary.</p> <p>Training/ briefings have not been provided for officers on their key management duties and responsibilities.</p> <p>Reason agreed for actions not being implemented:</p> <ul style="list-style-type: none"> -Restructuring in Children Services -focusing on dealing with a major data loss in the department (Work on ICC not seen as a priority based on focus on the above areas).

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				<p>Further Action:</p> <ul style="list-style-type: none"> - SLT will agree which managers are going to be involved in the ICC exercise going forward. - Procedures will be reviewed, and briefing sessions will be conducted to go through the revised procedures. - Revised briefing notes and procedural notes will be issued to the relevant officers. - Workshops will be held for managers with the Corporate Risk Officer in February 2011. <p>Revised</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				<p>Implementation date: February 2011 (next ICC cycle)</p>
	<p>Risk: Review & Monitoring There is a risk that identified control weaknesses may not be remedied and controls strengthened if the ICC returns are not accurately completed or adequately challenged and reported.</p>	<p>More scrutiny will be exercised when reviewing the ICC return. Incomplete/inaccurate ICCs will be re assessed by officers.</p>	<p>Head of Research & Management Information</p>	<p><u>Not implemented</u></p> <p>Monitoring process of higher level risks (which takes place quarterly) does not include review and monitoring of the ICC returns.</p> <p>No remedial. Follow up actions have been taken were incomplete/ inaccurate ICCs have been identified.</p> <p>Further Action:</p> <p>- ICC's to be monitored and reviewed on a quarterly basis by</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				the Senior Management Team (SMT) - Review of ICC's to be set as a standing item on SMT meeting agenda. - Incomplete /inaccurate ICCs that are identified will be re assessed by officer, and remedial actions taken where necessary. Revised Implementation Date: February 2011
Internal Control Checklist - PHR	Risk: Procedures There is a risk of poor control assessment and therefore poor internal control environment if procedures are not adequate, clear or communicated to staff.	Agreed. Procedures will be reviewed and improved where necessary.	Strategy & Performance Manager (as delegated)	<u>Implemented</u>
	Risk: Review & Monitoring There is a risk that identified control weaknesses may not be remedied and	Agreed. More scrutiny to be exercised when reviewing the ICC returns.	Strategy & Performance Manager (as	<u>Implemented</u>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	controls strengthened if the ICC returns are not adequately challenged or reported.	Incomplete/inaccurate ICCs will be reassessed by officers.	delegated)	
Remote Access	<p>Risk: Unacceptable level of risk exposure Where risk registers are incomplete, inaccurate or out of date, there is a risk that the Council may be unaware of the key risks in relation to implementing and managing remote access to the Council network.</p>	Risk management training is being organised through the corporate risk officer.	Head of Information Systems	<p>Partly Implemented</p> <p>Further Action required:</p> <ul style="list-style-type: none"> - Review of risks relating to remote working in risk register. - Development of risk identification and assessment process. <p>Revised Implementation Date: TBC</p>
Leisure Management	<p>Risk: Strategic Service Delivery There is a risk that the partnership may not be in line with or meeting Council strategic objectives which may lead to value for money not being achieved and a lack of clarity on the financial approach adopted by the service provider.</p>	<p>Agreed. The Leisure & Arts Programme Board will continue to oversee and set an overall direction for the service. A Partnership Board (consisting of LBB and GLL officers) will be set up to provide a high level forum to discuss strategic issues on a quarterly basis.</p>	AD (Environment & Operations)	<p>December 2010</p> <p>Partly Implemented:</p> <p>Meetings between LBB and GLL have been held, however the final</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
		The partnership review will provide further opportunity to clarify strategic issues such as Closed Book approach etc.		<p>reporting template for LBB to receive financial information has not been agreed.</p> <p>Further Action required:</p> <p>Agree the reporting for the open book accounting.</p> <p>Revised Implementation Date agreed:</p> <p>1st March 2011.</p>
	<p>Risk: Operational Service Delivery</p> <p>There is a risk of inappropriate or untrained staff being employed; poor equipment, facilities, support services (e.g. food/cafes) being provided which may compromise health and safety of customers leading to potential legal challenge and reputational damage.</p>	<p>Agreed.</p> <p>A risk log will be drawn up alongside the Action Plan to enable activities to be prioritised and monitored accordingly.</p>	AD (Environment & Operations) & Leisure Contract Manager	<p>December 2010</p> <p>Not Implemented</p> <p>All policies have been reviewed. Compliance will be managed through the monthly audit visits. The Leisure Contracts Manager will include these</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				<p>high risk areas identified in last audit report. Further Action required: The monthly audit visits to incorporate and prioritise high risk areas. Revised Implementation Date agreed: 1st March 2011.</p>
	<p>Risk: Performance Management There is a risk of poor decision making and financial loss if poor performance of the contractor (and therefore service delivery) is not identified or rectified.</p>	<p>Agreed. Key Performance Indicators will be established, monitored, validated where necessary and reported regularly. Poor performance will therefore be identified and rectified.</p>	<p>Leisure Contract Manager</p>	<p>March 2011 Not due for implementation</p>
	<p>Risk: Invoice Payments There is a risk of financial loss if inappropriate invoices are paid.</p>	<p>Agreed. Copies of the variation orders have been requested from GLL and further clarification is being sought to confirm the management fee/variation orders/BAFO calculations to enable enhanced validation of invoices.</p>	<p>Leisure Contract Manager</p>	<p>September 2010</p>
<p>Internal Control</p>	<p>Risk: Review of ICCs</p>	<p>Since completion of the testing in circa</p>	<p>Business</p>	<p>Implemented</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
Checklist - Adult Social Service	There is a risk that the consolidated ICC summary may reflect an inaccurate or incomplete assessment of the risks and weaknesses across the Directorate.	<p>December 2009, there have been a number of changes implemented by management.</p> <p>It is Management's view that these changes significantly reduce the risk originally identified and therefore the Priority 1 classification.</p> <p>These changes are as follows:</p> <p>Further work to tighten up the current ICC to ensure that the consolidation reflects a true and comprehensive view of Adult Social Services.</p> <p>Each Department's return for the March 2010 report to CDG on ICC was scrutinised / interrogated with questions being asked of managers; further all returns were reviewed to ensure that they were fully complete and no blank fields remained (unless they were not applicable).</p> <p>The Department has started a process whereby ICC risks and associated actions are reviewed quarterly at Divisional Management Meetings (with the Head of Performance in attendance),</p>	Improvement and Performance Officer and Business Continuity and Risk Officer	

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
		as well as at the Departmental Senior Management Team meeting. See also related comments for Risks 3 and 4.		
Common Assessment Framework	<p>Risk: CAF review process Without this formal quality review process, there is a risk that that care plan actions (and further actions, if necessary) may not be implemented and agreed outcomes may not be achieved leading to the development of more significant issues later and the need to refer the child to social services when this may have been avoided.</p>	<p>Management Comment and Action to mitigate risk</p> <p>Robust arrangements are required to quality review CAF assessments and assess how expected outcomes have been achieved</p> <p>A workshop has already been held addressing CAF quality assurance and arrangements for the evaluation of outcomes for children. These will be continued in line with needs.</p> <p>From 1 April 2010, refresher training for CAF practitioners will focus on/emphasise effective review of assessments</p> <p>Overall, a model for CAF delivery will be agreed (e.g. a multi-agency panel model involving all agencies ensuring a more strategic focus is being considered)</p> <p>A model for CAF review will be agreed</p>	Common Assessment Framework Co-ordinator	1 July 2010 Implemented

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
		<p>and implemented. The model, for tracking outcomes, is likely to involve either or a combination of the following:</p> <ul style="list-style-type: none"> - practitioner service managers reviewing CAF's against a best practice/guidance checklist - quality reviewing a sample of CAF's against a best practice/guidance checklist by a multi-agency panel made up of service managers <p>Note: Reviews will ensure that the delivery of CAF assessment care plan actions remain on track with a focus on the achievement of expected outcomes.</p>		
<p>Risk Management</p>	<p><u>Risk Management System</u></p> <p>Recommendation</p> <p>As part of the continuous migration of the risk information, CRMT should remind all Service Performance Leads that:</p> <ul style="list-style-type: none"> - risks are transferred onto the RM System within an agreed timeframe; - recording of risks in the excel spreadsheet format stops; and - progress reported back to the Risk 	<p>All Directorate Level risks have been input onto the RM System. All services will be reminded to record risks onto the RM System. Risk registers presented to CDG are now being produced from the RM System. Risk management arrangement in relation to Project Management and</p>	<p>Assistant Director of Finance, Audit and Risk Management</p>	<p>Ongoing</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>Management forums.</p> <p>CRMT should ensure that the corporate risks are also recorded onto the system.</p>	<p>Partnerships will be regulated as part of the RMS review.</p>		
	<p><u>Monitoring and reporting risk</u></p> <p>Recommendation</p> <p>CRMT should ensure that data within the Web Based RM System should be used for all reporting purposes</p>	<p>Ongoing rolling out of the risk management strategy.</p>	<p>Assistant Director of Finance, Audit and Risk Management</p>	<p>Ongoing</p>
	<p><u>Partnerships</u></p> <p>Recommendation</p> <p>CRMT should:</p> <p>a) develop formal reporting arrangements with the Council's Officer responsible for LSPs and Service Performance Leads to seek assurance that there are effective arrangements;</p> <ul style="list-style-type: none"> - for managing partnership risks in the delivery of Council services and there is evidence to provide assurance about the management of risk; - within the Business Continuity arrangements, which is a specific risk management process designed to 	<p>Consider resources to the One Barnet Programme. This is an on-going agenda item for the Risk Forum.</p>	<p>Assistant Director of Finance, Audit and Risk Management</p>	<p>Ongoing</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>manage the risk that may interrupt or stop effective service delivery.</p> <p>b) increase awareness through training that services need to develop their understanding of the common risks they share and work together to manage them. The complex interconnection between services e.g. children's service, NHS and adult services socials, means that services need to share and understand key cross cutting risks.</p>			

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
Cashless Parking 2010/11	1. Management should obtain the signed contract with the provider, and agree and document the process for ensuring the Council's income is accounted correctly on the SAP financial recording system. Appropriate advice should be obtained from the VAT Manager, Senior Management Accountant and the Cash Book team. The relevant processes should be agreed with Verrus. (Priority M)	We will obtain the signed contract with the provider. We will agree and document the process for ensuring the Council's income is accounted correctly on the SAP financial recording system. Appropriate advice should be obtained from the VAT Manager, Senior Management Accountant and the Cash Book team. The relevant processes will also be agreed with Verrus.	Parking Manager	<p>Due date: Sept 2010 Audit comment: Partly implemented</p> <p>A signed contract has now been obtained. Copy of contract was obtained by the service in November 2 10. It is noted that the service is currently considering an extension of contract for one year from 1st April 2011.</p> <p>However, consideration of formalising processes to ensure that the Council's income is accounted correctly on the SAP financial system will be undertaken</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				<p>when the contract extension is completed.</p> <p>Further Action required: Formalise the arrangements for obtaining services from the provider going forward, and agree processes for ensuring that cashless parking income is correctly accounted on the council's financial system. (Priority M)</p> <p>Revised Implementation date: February 2011</p>
Cashless Parking 2010/11	2. Information on both any fraudulent use of cards and instances of refunds claimed by service users, should be obtained and reported to Management	Information on both any fraudulent use of cards and instances of refunds claimed by service users will be reported to Management and the impact on business	Parking Manager	Due date: Sept 2010 Audit comment: partly

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>for identifying any impact on business benefits that may need to be considered in developing and planning the future roll out of the service. (Priority M)</p>	<p>benefits will be considered for informing the further roll out of the service.</p>		<p>implemented Process for a Manager/Team Leader to authorise ALL refund requests in place. (Implemented)</p> <p>However, information relating to fraudulent card use has been requested from the provider hence the process is still to be developed.</p> <p>Further Action required: As above. (Priority M) Revised Implementation date: February 2011</p>
<p>Cashless Parking 2010/11</p>	<p>3. Management should formalise the process for reconciliation of income collected by Verrus, and VAT amounts, deposited into the Council's accounts,</p>	<p>We will formalise the process for reconciliation of income collected by Verrus, and VAT amounts, deposited into the Council's accounts, in conjunction</p>	<p>Parking Manager</p>	<p>Due date: Sept 2010 Audit comment: partly</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
	<p>in conjunction with all relevant parties: Verrus, Finance and Accountancy as well as Cash Book team, to gain the confidence that all incomes collections are banked in full in to the Council's bank account. Reasons for differences identified from such reconciliation, and the level of debtors, should be reported to the Management. A review of VAT accounting for parking income from all off-street sources should be prioritised.</p> <p>(Priority M)</p>	<p>with all relevant parties: Verrus, Finance and Accountancy as well as Cash Book team, for gaining the confidence that collections of income are banked in full in to the Council's Bank account. Reasons for differences identified from such reconciliation will routinely be reported to the Management. A review of VAT accounting for parking income from all-off street sources will be prioritised.</p>		<p>implemented Training undertaken and further meetings scheduled to review reconciliations and differences. According to the service, the implementation date has been extended to facilitate the contract extension and any relevant work which may arise from this, including the format of the data which is received from Verrus.</p> <p>Further Action required: as per action agreed. (Priority M) Revised Implementation date: May 2011</p>

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
Cashless Parking 2010/11	4. Arrangements with the provider should be reviewed routinely to identify improved reporting arrangements, where required, for ensuring that the council is receiving sufficient information for monitoring purposes. (Priority M)	In the light of the Audit, we will review the current reporting arrangements with the provider and identify improvements, where required, for ensuring that the council is receiving sufficient information for the purpose of monitoring the contract.	Parking Manager	Due date: Sept 2010 Audit comment: Partly implemented Additional reports as required by the Finance Officer have been requested. Further Action required: as per actions agreed (Priority M) Revised Implementation date: March 2011
Cashless Parking 2010/11	5. Robust arrangements for verification of the provider's invoices should be implemented to ensure the number of transactions completed, which informs the pay amount, are confirmed directly from the reconciliation produced by Service Accountants from the Council's SAP accounting system. (Priority M)	Robust arrangements for verification of the provider's invoices will be implemented to ensure the number of transactions completed, which inform the pay amount, are confirmed directly from the reconciliation produced by Service Accountants from the Council's SAP accounting system.	Parking Manager	Due date: Sept 2010 Partly implemented Additional reports as required by the Finance Officer have been requested. Further Action required: as per action agreed (Priority M) Revised

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
				Implementation date: March 2011 confirmed
Cashless Parking 2010/11	6. Routine independent checks on the accuracy of the transactions reported (parking spaces sold, and charges levied) by Verrus should be instituted. (Priority M)	Routine independent checks to verify the accuracy of the transactions reported (parking spaces sold, and charges levied) by Verrus will be instituted.	Parking Manager	Due date: Sept 2010 Audit comment: Partly implemented As a part of the work being completed to rationalise P&D machines on street, regular checks and reports on transactions are being completed. Routine checks will be carried out by the Maintenance Manager. Further Action required: as above (Priority M) Revised Implementation date: March 2011
Cashless	7. Management should arrange	Access to Verrus's management	Parking	Due date: Sept

Audit Name	Recommendation/Risk	Management Response	Responsibility	Implementation date
Parking 2010/11	necessary access for an identified officer within the Parking Service and arrange relevant training, to ensure the nominated officers are able to obtain necessary information and reports, as required. (Priority M)	information system will be arranged for the Parking Manager and the Finance Manager. Relevant training will be provided/arranged to ensure the nominated officers are able to obtain necessary information and reports, as required.	Manager	2010 Audit comment: implemented
Independent Provider Performance – BRSI 2010/11	There were no priority 1 recommendations to follow-up with officers.			

Appendix B

No	Recommendation	Priority (high/medium/low)	Agreed	Comments	Action to date
1	The Council develop and agree a business case for the One Barnet programme, incorporating: <ul style="list-style-type: none"> · the planned benefits and outcomes of the programme; · the estimated cost of the programme; · overall timescales of the programme, including key anticipated milestones; and · a high level risk profile. 	H	Yes	The majority of live projects within the programme are still assessing options with regard to the future of our services. It is unlikely that we will have an exact list of benefits until these options have been fully assessed and business cases produced in each case. We are able, however, to articulate the desired outcomes and estimated benefits of the programme, along with costs, timescales and a risk profile	One Barnet Framework signed off by Cabinet 29 th November 2010
2	Additional programme documents are developed and approved to ensure that the Council has the capacity to deliver the programme, is clear about how stakeholders will be engaged, and how performance improvement and programme benefits will be managed.	M	Yes	A Communication and Engagement Strategy is being produced by the Internal Communications Manager working on the programme. This is to be reviewed by the Operational Group in September 2010. The Internal Communications Manager is already working with project managers to ensure project level communication and engagement plans are in place	Communications and engagement plans are in place for live projects across the programme. Resource requirements have been identified as part of our project / programme planning. This is an ongoing process as new projects are identified. One Barnet Framework (including benefits realisation framework) signed off by Cabinet 29 th November 2010
3	The Council:	M	Yes	HR resources within the programme	A transition strategy has been

Appendix B

No	Recommendation	Priority (high/medium/low)	Agreed	Comments	Action to date
	(a) develops a Transition Plan to ensure business as usual is maintained during the delivery of the programme, and (b) finalise and agrees a programme Communication Strategy.			are responsible for putting a Transition Plan in place for each project. Transition planning at a detailed level cannot begin, however, until projects begin to narrow down options and build business cases. A Transition Strategy can be produced for the programme at this stage. HR will also support the production of the resource strategy to ensure there is resource in the business so that organisational performance is not negatively affected	drafted. This is to be reviewed in March 2011. Communications and engagement plans are in place for live projects across the programme.
4	The Council should consider developing and agreeing a Benefits Realisation Framework	H	Yes	The realisation of benefits is paramount to the success of this programme, therefore a framework will be put in place to support this work stream	One Barnet Framework (including benefits realisation framework) signed off by Cabinet 29 th November 2010
5	The Project Management Arrangements are enhanced by ensuring that: · A high level programme plan is developed and maintained. · Project tolerances are set and agreed	M	Yes	There is no budget tolerance for any project in this programme	The programme plan is currently being reviewed for sign off by end of February 2011 Project tolerances are agreed by project boards at each stage of the project.

No	Recommendation	Priority (high/medium/low)	Agreed	Comments	Action to date
	<ul style="list-style-type: none"> Project communication plans are developed and implemented. 				Communications and engagement plans are in place for live projects across the programme.
6	The approach to Risk Management be enhanced by ensuring that the programme has established risk management and issues resolution standards for all projects. For example, so that all PIDs adopt the same, corporate standard content, when setting out risks, and the process for escalating risks is clearly understood	M	Yes	Action: Risk Management Framework , including risk and issue management standards signed off (12 October 2010) . Framework to be communicated to all live and pending projects and stakeholders within one week of sign off	A risk manager has been assisting the programme manager in developing a framework. All projects have individual risk registers with issues escalated to the programme risk register and then to the corporate risk register. The programme manager also attends the quarterly risk forums. The process for programme and project risk management is described within the revised risk management strategy which will be presented to the Audit Committee in March.