

APPENDIX 3: SUMMARY AUDIT FINDINGS

PARTNERSHIPS	
WORK TITLE:	MENTAL HEALTH DEEP DIVE
OBJECTIVE OF THE WORK:	<p>On behalf of the Cross Partner Internal Audit Working Group, provide appropriate challenge and support throughout the mental health deep dive. The aim being to provide timely and independent feedback:</p> <ul style="list-style-type: none"> • as to the controls required to mitigate process or system risks identified; • on whether the project management arrangements are fit for purpose and will deliver the required outcomes.
OUTCOME:	<p>The aim of this deep dive was to improve the partnership working in delivering mental health services in Southend. The key outcomes were to define a clear common understanding of priorities and an agreed action plan to support the Southend specific Mental Health Strategy.</p> <p>The work was completed in January with a mixed outcome. Whilst a clear action plan has not been produced to deliver an updated mental health strategy across all aspects of the service, a few pilot exercises are being taken forward in high cost areas (e.g. residential care) which involve closer joint working arrangements. Broad working arrangements have been agreed, though current restructuring within each of the partners has delayed further progress.</p> <p>There will be a follow up role for audit to assist in reviewing the robustness of the proposed arrangements. This is anticipated to take place in the summer.</p>

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PARTNERSHIPS	
WORK TITLE:	DOMESTIC ABUSE DEEP DIVE
OBJECTIVE OF THE WORK:	<p>On behalf of the Cross Partner Internal Audit Working Group, provide appropriate challenge and support throughout the 10 week period of the deep dive. The aim being to provide timely and independent feedback on whether:</p> <ul style="list-style-type: none"> • as to the controls required to mitigate process or system risks identified; • on whether the project management arrangements are fit for purpose and will deliver the required outcomes.
OUTCOME:	<p>The aim of the deep dive was to make sustainable improvements in the joint delivery of services across partners that would:</p> <ul style="list-style-type: none"> • improve the quality and speed of response to victims and perpetrators • allow pro-active management of risk to prevent incidents of domestic abuse, and • find financial savings. <p>The deep dive is substantially complete (week 8 of 10) and a cross partner solution has been developed. Customer experience mapping is being undertaken by an advocacy agency to understand the feasibility of the model. The deep dive is expected to be completed in April.</p>

REGENERATION SCHEMES, CAPITAL PROGRAMME AND PROJECTS	
REPORT TITLE:	EXTERNAL GRANT FUNDING: ARRANGEMENTS FOR ENSURING COMPLIANCE WITH TERMS AND CONDITIONS
OBJECTIVE OF THE WORK:	To assess whether the Council's has consistently applied and robust arrangements for ensuring that grant terms and conditions are complied with when external funding is received.
OUTCOME:	The opportunity has been identified to introduce a simple but standard approach to recording information about grants received as well as evidencing compliance with grant terms and conditions. A task and finish group is being formed to finalise these arrangements before rolling them out across the Council.

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REGENERATION SCHEMES, CAPITAL PROGRAMME AND PROJECTS	
REPORT TITLE:	IMPLEMENTATION OF AGRESSO PROJECT (STAGE 1) 1ST MEMO ISSUED DECEMBER 2010
OBJECTIVE OF THE WORK:	<p>To provide appropriate challenge and support during the development and implementation stages of the Agresso project.</p> <p>The aim being to provide timely and independent feedback:</p> <ul style="list-style-type: none"> • as to the controls required to mitigate process or system risks identified; • on whether the project management arrangements are fit for purpose and will deliver the required outcomes.
OUTCOME:	<p>The project has continued to be managed by a specific Agresso Project Board (the Project Board). Since the issue of the last memo, regular updates on the progress of the project have been provided to the Corporate Delivery Board.</p> <p>The project carried a significant number of risks which made it challenging for the new system to “go live” on the 1st April 2011. Changes in the financial services project lead and project manager in October 2010, and the resulting need for these staff to get up to speed in a short space of time has resulted in delays in the planning and building phases of the project. As the likelihood of successfully implementing Agresso on the 1st April has continued to reduce, the Project Board decided that it would be best to delay the “go live” date.</p> <p>Provisionally, a revised implementation date of 1st August has been noted. However, to avoid setting unrealistic targets, this will be confirmed at the end of March, by which time the build phase will be substantially complete and a clear picture can be provided of the work outstanding.</p> <p>Internal Audit continue to provide a critical friend role at the Project Board meetings and through informal discussions with the Project Manager. The next phase of audit work will involve testing the results data cleansing and migration exercise, which is expected to take place in April.</p>

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RISK BASED REVIEWS:				
REPORT TITLE:	LOCAL SAFEGUARDING CHILDREN'S BOARD SERIOUS CASE REVIEW: HOUSING SERVICES			
STATUS	COMPLETED MARCH 2011			
OBJECTIVE OF THE WORK:	<p>For the case file used, the review assessed the adequacy of arrangements in place to make sure that:</p> <ul style="list-style-type: none"> • where process improvements needed to be made these were clearly communicated and understood by staff; • there was clear officer accountability for addressing the actions; and • there were procedures in place to monitor the implementation of recommendations made through the various management levels. <p>In addition evidence was requested to support the full implementation of all the recommendations identified within the Housing Service action plan arising from this case.</p>			
OUTCOME:	<p>The Housing Services team were able to describe their arrangements for implementing recommendations from serious case reviews but in order to strengthen assurance that arrangements are robust and therefore that the overall safety of children is improved, it has been agreed that:</p> <ul style="list-style-type: none"> • progress on the implementation of recommendations will be reported to the Adult and Community Services' Departmental Management Team; • the minutes of Housing Services' team meetings will be more explicit in recording the overall messages that have come out of the serious case reviews and the specific actions which staff need to take to improve working practices; and • as part of the client side monitoring arrangements, Adult and Community Services will request copies of the reports submitted to the South Essex Homes Board detailing the progress made in implementing actions from serious case reviews that they are involved with. 			
RECOMMENDATIONS:	HIGH: 1	MEDIUM: 2	LOW: 0	TOTAL: 3

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RISK BASED REVIEWS:				
REPORT TITLE:	LOCAL SAFEGUARDING CHILDREN'S BOARD SERIOUS CASE REVIEW: CHILDREN & LEARNING DEPARTMENT			
STATUS	Completed March 2011			
OBJECTIVE OF THE WORK:	<p>For the case file used, the review assessed the adequacy of arrangements in place to make sure that:</p> <ul style="list-style-type: none"> • where process improvements needed to be made these were clearly communicated and understood by staff; • there was clear officer accountability for addressing the actions; and • there were procedures in place to monitor the implementation of recommendations made through the various management levels. <p>In addition evidence was requested to support the full implementation of all the recommendations identified within the Children and Learning Department's action plan arising from this case.</p>			
OUTCOME:	<p>Assurance was available to prove that arrangements were in place to monitor the implementation of recommendations from serious case reviews and that this was reported to Children and Learning's Departmental Management Team (DMT).</p> <p>To improve the overall effectiveness of these arrangements it has been agreed that a named officer from each relevant service area within Children and Learning will collate the evidence that recommendations have been implemented and the submission will be signed off by the relevant management group before being presented to DMT for final approval. These arrangements will be shared with the Corporate Management Team in order that each Director can consider this process for recommendations which relate to their own departments.</p> <p>In addition it has been agreed that, in view of the significance and high profile of recommendations from serious case reviews, the Council's Corporate Management Team will receive overall assurance that all Council departments are implementing recommendations properly and in a timely manner. The arrangements for this will be agreed with departments.</p>			
RECOMMENDATIONS:	HIGH: 3	MEDIUM: 1	LOW: 0	TOTAL: 4

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GRANT CERTIFICATION WORK:	
REPORT TITLE:	LOCAL AREA AGREEMENT STRETCH TARGETS
COMPLETED	COMPLETED JANUARY 2011
OBJECTIVE OF THE WORK:	To review whether stretch targets owners across the partnership had adequate systems in place to produce target performance data and performance reported is accurate.
OUTCOME:	The Head of Internal Audit was able, for the indicators reviewed to say that, there was reasonable assurance that the performance information systems were adequate to produce accurate performance information.