	vice Risks								
Report title	Contract Management within the Traffic and Highways Group	Report issued	December 2014						
Objective	To identify and evaluate whether there were adequate and effective arrangements in place within the Traffic and Highwa Team to manage contracts so as to ensure that the work was delivered on time, to budget, in line with client expectations								
Assurance	High Satisfactory Partial		Minimal						
Conclusion and key themes	There is a need to significantly improve the arrangements within this service area for maintaining appropriate tender and contract documentation maintaining staff consistently manage contracts in accordance with the terms set of Many of the services being managed by this Group are due to be retendered in the In preparation for this, action has been taken to redesign the services required and overall as well as restructure the team (during the summer 2014). As part of this work, action is being taken to address the issues identified by the autiender documentation for each contract, is retained and held centrally there is a signed and bound copy of final contracts that are held securely in a confficers manage the contracts in the manner set out in the signed documents as probity and accountability as well as realisation of any future cost savings agreed any amendments agreed to the contract are properly authorised in accordance that things like retention monies, performance bonds and liquidated damages as staff managing contracts are set appropriate performance targets regarding how management obtain appropriate evidence that these performance targets are be timely and useful performance management information is provided to the resp going delivery of each contract properties are maintained that reconcile work signed off as complete to contract, until corporate arrangements are in place to do this via relevant IT sys	out within them. e new year, with a d reduce the num udit to ensure: eentral location nd this is evidence with the Scheme are dealt with prop w this is to be do being met bective management	ber of contracts being let ed thus ensuring proper of Delegation perly ne and both line and senice ent teams about the on-						

Report title	Children's Social Care File Audit Framework	Report issued	November 2014		
Objective	To assess whether the Quality Audit Plan Framework (part of the overarching Children designed and focused appropriately to provide management with good quality, indeper cases are being managed in accordance with relevant assessment and legislative guid	ndent evidence tha	,		
	This audit will look at a selection of files that have been audited by Children's Social Ca Assurance Framework processes to assess whether the audit tool has been consisten		the Quality		
Assurance	High Satisfactory Partial		Minimal		
Conclusion and key themes	The quality audit plan framework is satisfactorily designed. It is up to date, reflecting a consistent with Ofsted's framework and evaluation schedule for inspections of services appropriate guidance on how to undertake the audits themselves. It aims to audit a significant content of the co	s for children. It is	supported by		
	The key outcome from the results of the quality audits is that further work is necessary required standard by demonstrating a clearer understanding where improvements are occurring. Importantly this should understand whether there are particular areas of so that need specific focus to improve standards. Some action is now being taken to achieve persistently inadequate files including a stronger escalation process to ensure the issue.	needed and why v cial care work, wor ieve this; there is a	veaknesses are king practices or sta		
	The quality audit framework sits within a wider quality assurance framework providing other sources of assurance that to an extent mitigate the risks of any weaknesses in the files although a robust file is an important objective in itself. The quality audit plan framework has had notable examples of being used to identify, understand and drive improvements.				
	The required numbers of audits, over the course of the year, are undertaken. However, in some individual months, significantly less than the required numbers are undertaken. This increases the risk any significant issues may not be identified at the earliest opportunity.				
	Files are audited by suitable individuals of sufficient standing in the field. This notably bring additional challenge to not only the files themselves but also the audit process ar However, more formal agreements setting out roles and responsibilities and processes auditors are needed.	nd working practice	es more generally.		

Grant Claims							
Report title	Troubled Families Programme, Payments by Results Scheme Grant	Report issued	November 2014				
Objective	To assess compliance with the terms and conditions of the Department for Communities and Local Government's (DCLG) Financial Framework for making Payment by Result (PBR) Claims.						
Background	The Financial Framework requires that claims are approved within each local authority's own internal audit arrangements under the authority of the Chief Executive. The Chief Executive and Head of Internal Audit are required therefore to satisfy themselves that the evidence supporting PBR claims made in respect of individual families is in line with the DCLG's Financial Framework scheme.						
Opinion	August 2014 Claim, signed off by Internal Audit.						
	October 2014 Claim, overall sign off of the claim was not possible.						
Conclusion and key themes	October 2014 Claim For the first time, the October 2014 claim included families identified as meeting the DC 'data sweeping' exercise of relevant council systems. As these claims had been identified was not routinely available to confirm that all the entry and exit criteria had been met. To claims presented for audit. The Group Manager self certified these claims based of undertaken by officers involved in working with these families. However Internal Audit was able to sign off the remaining 48% of cases submitted as marrangements as: • no issues were identified from random audit testing of the claims already independent the error which did come to light is considered to be an isolated one. Going forward, protocols are being agreed that enable independent verification to take	ied from different These cases repre- on her knowledge neeting the agreed ently checked by the	sources, evidence esented 52% of the of the work d protocol ne Group Manager				
	submitted. Recommendations were also made to help strengthen the arrangements to reduce the risks of duplicate claims being made which the service are implementing.						

	ervice Risks								
Report title	Safeguarding: Serious	Case Review Action Plan Imple	mentation	Report issued	November 2014				
Objective	To assess whether the actions agreed, for Council departments, in the most recent Case Review Action Plan for Baby AR have been implemented and are now effectively embedded into the day to day operation of the service.								
Assurance	High	Satisfactory	Partial		Minimal				
Conclusion and key	The original target implementation dates (December 2012 to July 2013) have been missed for a number of recommendations made. However, at the time of the audit, evidence was available to confirm:								
themes	full implementation of eight of the sixteen recommendations								
	that some action had been taken to consider and / or improve operational processes and practices in the remaining areas but further work is required to fully address the issues raised.								
	A status report summarising progress made to date and the outstanding evidence required to sign off recommendations has been prepared, revised implementation dates will be allocated by the Head of Service in taking this forward.								
	It should be noted that this is the first time that the arrangements for monitoring the implementation of case review action plans has been reviewed since the Department of People was created. The Corporate Director is taking action to fully integrate the monitoring of case reviews into the departments performance management framework.								

Managing Service Risks							
Report title	The Forum Governance Arrangements	Report issued	November 2014				
Objective	To assess whether appropriate arrangements, processes and agreements are in place, or being developed, to establish then manage the new shared central library building known as the Forum.						
Assurance	High Satisfactory Partial		Minimal				
Conclusion	Key financial, operational and governance documents are in place setting out how the	Forum is controlle	d and operated.				
and key themes	Councillors serve as directors of the Forum's management company and whilst this is by no means inappropriate, such arrangements inherently need extra care to ensure the Councillors can discharge their joint roles most effectively, whilst recognising their prime responsibility when acting as a director is to the company and not the Council. Where necessary, Councillors should be given further guidance and training on this matter.						
	There is an ongoing flow of information between officers of the Council and the Forum Management Company to keep the Council appraised of activity and developments. To improve the level of assurance the Council receives, it is recommended that these arrangements are formalised and an annual report of the activities of Councillors serving as directors is provided for Council oversight (this has implications corporately for all councillors serving on outside bodies).						
	The key safeguard for the Council over the Forum building's future operation is the requirement for unanimity in decision-making.						
	However, the Council's awareness, and assurance received, over the Forum's on-going financial and operational direction and actual performance needs to be improved significantly through regular and insightful reporting formally between the Forum's management company and the Council.						
	This notably includes ensuring the method of apportioning shared costs between partners is clearly understood and appropriate and reporting on a measurable set of indicators, giving insight into whether the Council is deriving the required benefits from the new arrangements.						

Report title	Capital Project Management	Report issued	December 2014				
Objective	To assess whether there are robust day to day project delivery and management arrangements in place to required outcomes from strategic regeneration / capital projects effectively, on time and on budget.						
Assurance	High Satisfactory Partial		Minimal				
Conclusion and key themes	Capital projects need to be more demonstrably managed in a consistent and reflective confidence that both individual capital projects and the collective capital programme will delivered on time and on budget.						
	Operating arrangements need to be amended to require a formal protocol to be produced establishing the relationship between the commissioners of capital projects (i.e. service areas) and the Property and Regeneration Team (the P&R Team) as the deliverers of those projects. The protocol needs to include a definitive statement of:						
	when the P&R Team take control of the project						
	how ongoing project governance will operate						
	 roles and responsibilities for resolving emergent issues during the project (such as need for increased budget or re- configuring the project and its objectives to keep within existing budgets). 						
	Importantly stronger, more systematic pre-project and project initiation stages need to be adopted consistently by commissioning services to ensure before they start that projects are feasible, accurately costed and assessed as providing a sufficient return on investment in terms of achievement of departmental and corporate objectives. At present, individual projects are assigned budgets before any feasibility studies or business cases are undertaken.						
	Logs of issues arising and post-implementation reviews should also be strengthened to improve the Council's collective project management memory and capability.						
	The recording of the progress of all capital projects needs to be improved so it is easier to establish any individual project's targeted and actual stage of delivery is at any point in time.						
	The P&R Team's own project management procedures need to be regularly updated to reflect the required good practice processes staff will be expected to implement. This should also include greater clarity on how processes can be tailored given a project's relative size, importance and complexity.						

Managing the	Business					
Report title	Contract Management Framework	Interim feedback provided	June to December 2014			
Objectives	To identify and assess for appropriateness, any existing guidance actions they should take when preparing to and letting as well as	-				
	(This piece of work was undertaken to provide management with a position statement on these arrangements. The Contract Management Framework consists of Financial Regulations, Contract Procedure Rules, the Scheme of Delegation, the Procurement Toolkit and the Contracts Register).					
Conclusion and key themes	The review identified that there was a need to fundamentally updated and consistently sets out the Council's expectations of how staff and letting contracts and then managing them.		_			
	Work is underway to update the Financial Regulations (FRs), Cordocuments such as a Procurement Toolkit. The intention is to ge Whilst these documents are being updated, the opportunity is bei	t FRs and CPRs approved and i				
	address the potential implications of the new draft 2015 Public Contracts Regulations					
	• include reference to the Social Value Act, which looks to add economic, social or environmental benefits for the local area through procurement					
	reconsider the Terms of Reference for and the role of the Procurement Review Group.					
	Some thought also needs to be given to how we can routinely make contractors and third parties aware of and sign up to the Council's Anti Fraud and Corruption and Whistleblowing Policies and evidence this.					
	Once approved, appropriate action will be taken (still to be define compliance with them is going to be monitored.	d) to inform staff of the updated	requirements and how			
	Named officers should then be made accountable for at least a bi	i-annual review of these docume	nts.			

Action is underway to implement a new E-Procurement IT system across the Council during 2015, the Department of Place being the first area it is being applied to. It is important that the system is set up to:

- reflect the requirements of the updated contract management framework so it is cohesive
- enable contract management activity recorded in it to be clearly linked to payments made in Agresso so that it is possible to:
 - easily reconcile work completed to actual payments made
 - produce reports of what has been paid in total under an individual contract, not just to a supplier
 - account for things like retentions consistently.

This project will also include:

- exploring how to enable information from hand-held PDAs via the Symology Street Works System to be loaded directly into Agresso, rather than being input manually
- assessing the adequacy of performance management information being reported to the various levels of management on the letting and management on contracts, thus providing some assurance regarding compliance with CPRs
- setting out the expectations for job profiles where the primary role is to let and manage contracts as well as provide guidance on the kind of performance targets these individuals should be set and assessed against.

However in the short term (i.e. until E-Procurement is fully implemented), action is required corporately to set out interim arrangements for services to:

- inform the Corporate Procurement Team of all contracts exceeding £50,000 so a complete and accurate contract register can be created
- produce original contract documentation for all current and newly let contracts (which should be bound so the terms signed up to can't be changed without contract variation documentation) so they can be held centrally
- deal with the receipt, opening and filing of contract tenders exceeding £50k
- explain how to use Agresso in a consistent manner so that all transactions relating to a contract are properly accounted for and traceable to that contract.

Number of actions agreed 15

Managing the	Managing the Business and Service Risks								
Report title	Compliance with Contract Procedural Rules Exercise complete November 2014								
Objectives	To identify whether services could evidence compliance with Contract Procedure Rules when letting contracts.								
Conclusion and key themes As part of the proactive counter fraud work programme, expenditure over £50k to suppliers was analysed over the proactive counter fraud work programme, expenditure over £50k to suppliers was analysed over the proactive counter fraud work programme, expenditure over £50k to suppliers was analysed over the proactive counter fraud work programme, expenditure over £50k to suppliers was analysed over the proactive counter fraud work programme, expenditure over £50k to suppliers was analysed over themes.									
	At the time the work was completed, there was not a contract in place for six of the ten services reviewed, two in each of the departments with values ranging from £31k to 1.7M.								
	lace for one of these red.								
	The findings from this work has been fed back to the relevant departments who will be taking appropriate action to ensure future spend in these areas complies with Contract Procedure Rules.								

Managing the	Managing the Business and Service Risks					
Report title	Procurement Review Group					
Objective	To assess whether service areas' requests meet the criteria to be granted an exemption from the required competitive process, as set out in the Contract Procedure Rules, along with colleagues from Legal Services, Financial Management and Procurement.					
Work flow	Internal Audit has assessed and provided feedback on one request during October – November 2014.					
Key Themes Arising	The one request was approved on the condition the service competitively re-tender the contract within six months of the date the exemption was agreed.					

Finance, Manageme	nt and Governance A	udit in Schools						
Objective	To assess whether individual schools have adequate and effective governance, information and asset management as well as financial management and reporting arrangements in place.							
School Name	Bournes Green Infa	nt School				Report issued	November 2014	
Opinion	Adequate							
Recommendations	High: 5		Medium: 13			Total: 18		
Assessment Agains	t Key Performance Cr	iteria						
Audit Enquiry				Assessment	Significant Improvement Opportunities			
Governance								
The governing body is recruited and trained.	s properly formed and g	overnors are effe	ectively	Adequate	None.			
Governors are provid role effectively.	ed with sufficient inform	ation to exercise	their oversight	Good				
Roles, responsibilities	and powers are clearly	defined and enf	orced.	Adequate				
Information and Ass	set Management							
Confidential, personal and sensitive information is effectively managed and secured.			managed and	Adequate	None.			
Assets are secured a	nd maintained.			Improvement Required	and reco		gularly undertaken ne inventory remains re accounted for.	

Audit Enquiry	Assessment	Significant Improvement Opportunities					
Financial Management and Reporting							
There are sufficient, appropriately qualified and experienced finance staff to plan, process and manage financial arrangements effectively and efficiently.	Good	None.					
There is effective financial planning that provides a clear view of how the school will use its resources to achieve objectives.	Adequate						
The budget position is accurately known, monitored on a regular, timely basis and reported to senior management and the governing body.	Good						
Financial transactions are accurate, complete, authorised, substantiated, made securely and accurately recorded.	Adequate						
Goods and services are procured fairly and achieve value for money.	Adequate						

Finance, Management and Governance Audit in Schools							
Objective	To assess whether individual schools have adequate and effective governance, information and asset management as well as financial management and reporting arrangements in place.						
				l			
School Name	Sacred Heart School			Report issued	November 2014		
Opinion	Adequate						
Recommendations	High: 5	Medium: 17		Total: 22			
Assessment Agains	t Key Performance Criteria						
Audit Enquiry		Assessment	Significant Improvement Opportunities				
Governance							
The governing body is effectively recruited a	s properly formed and governors are nd trained.	Adequate	None.				
Governors are provide exercise their oversig	ed with sufficient information to ht role effectively.	Good					
Roles, responsibilities enforced.	and powers are clearly defined and	Adequate					
Information and Ass	et Management	1	,				
Confidential, persona effectively managed a	I and sensitive information is and secured.	Adequate	None.				

Audit Enquiry	Assessment	Significant Improvement Opportunities
Assets are secured and maintained.	Improvement Required	Spot checks should be regularly undertaken and recorded to confirm the inventory remains accurate and all assets are accounted for.
		There should be a periodic reconciliation on new purchases to the Asset Register to ensure the Asset Register is complete and all assets can be accounted for.
Financial Management and Reporting		
There are sufficient, appropriately qualified and experienced finance staff to plan, process and manage financial arrangements effectively and efficiently.	Good	None.
There is effective financial planning that provides a clear view of how the school will use its resources to achieve objectives.	Good	None.
The budget position is accurately known, monitored on a regular, timely basis and reported to senior management and the governing body.	Good	
Financial transactions are accurate, complete, authorised, substantiated, made securely and accurately recorded.	Improvement Required	The school should introduce more formal procedures to verify that proposed changes to supplier details are genuine (notably ongoing suppliers' details). Supplier impersonation to fraudulently divert payments is a common risk that has affected many public service organisations.
Goods and services are procured fairly and achieve value for money.	Adequate	None.

Finance, Management and Governance Audit in Schools									
Objective	To assess whether individual schools have adequate and effective governance, information and asset management as well as financial management and reporting arrangements in place.								
School Name	St. Mary's Prittlewell CofE Primary School Report issued December 2014								
Opinion	Adequate								
Recommendations	High: 5	Medium: 18	Medium: 18		Total: 23				
Assessment Against Key Performance Criteria									
Audit Enquiry		Assessment	Significant Improvement Opportunities						
Governance									
The governing body is properly formed and governors are effectively recruited and trained.		Adequate	None						
Governors are provided with sufficient information to exercise their oversight role effectively.		Adequate							
Roles, responsibilities enforced.	s and powers are clearly defined and	Adequate							
Information and Ass	set Management		,						
Confidential, personal and sensitive information is effectively managed and secured.		Improvement Required							
			A Records Management Policy should be put in place to guide users in the appropriate ways to handle, collect and destroy data.						

Audit Enquiry	Assessment	Significant Improvement Opportunities
Assets are secured and maintained.	Improvement Required	The Asset Register module on SIMS is utilised to record all relevant details about the school's assets above an agreed minimum value.
Financial Management and Reporting		
There are sufficient, appropriately qualified and experienced finance staff to plan, process and manage financial arrangements effectively and efficiently.	Good	None.
There is effective financial planning that provides a clear view of how the school will use its resources to achieve objectives.	Good	
The budget position is accurately known, monitored on a regular, timely basis and reported to senior management and the governing body.	Good	
Financial transactions are accurate, complete, authorised, substantiated, made securely and accurately recorded.	Improvement Required	When receiving proactive confirmation that a change of supplier details is genuine, this should be evidenced on the original letter asking for a change of details.
		There should be a quarterly check of all the changes made to supplier details. This should be conducted by a member of the management team who is independent from changing the supplier details originally.
Goods and services are procured fairly and achieve value for money.	Good	None.

Finance, Man	Finance, Management and Governance in Schools						
Report title	Seabrook College	Report issued	October 2014				
Objective	To assess the level of progress being made towards establishing, and then embedding, improved governance arrangements and management of information, assets and finances.						
Background	The College is a federation of a special school (Prittlewell Centre) and a pupil referral unit (Shoebury Centre) and was until October 2013 governed by a Management Committee at the Pupil Referral Unit and an Interim Executive Board at the special school. After that date a new governing body took over responsibility for the federated college named Seabrook College. The Interim Executive Board ceased to act when the special school came out of special measures at the end of March 2014.						
	Over the last 12 months, the College has experienced a significant change in governance arrangements including the clerk and business / finance management.						
	The new management team inherited significant operational and procedural problems that needed to be addressed. Some of these issues were highlighted in a draft audit report issued late January 2013 in respect of the special school that does not appear to have been fully addressed by the IEB.						
	Given the recent history of the College, the audit was undertaken to:						
	• understand the current status of actions being taken as well as providing direction should they require further development						
	assess and provide the college feedback on the robustness of new arrangements implemented since the new management team has been in place.						
Conclusion and key	The current governing body and senior management have improved, or are actively additional management arrangements and processes.	dressing, many go	overnance and				
themes	A status report has been agreed with the College to contribute to the on-going improvement process by highlighting the areas where further focus is necessary.						
	The areas for improvement set out in the status report are primarily legacy issues from the previous governance, clerking and finance management arrangements that still need addressing.						
Actions required	The actions proposed to further strengthen these arrangements have been discussed a Headteacher, Business Manager and the Chair of Governors.	nd agreed with th	e Executive				