West Dunbartonshire
C O U N C I L

**REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLANS
AT 30 SEPTEMBER 2021**

Summary: **Section 1** **Summary of Management Actions due for completion by 30/9/2021**

There were 2 actions due for completion by 30 September 2021, one of which has been reported as completed by management and the completion date in relation to the other action has been revised.

Section 2 **Summary of Current Management Actions Plans at 30/09/2021**

At 30 September 2021 there were no audit reports delayed due to management not finalising the action plan within agreed timescales.

Section 3 **Current Management Actions at 30/09/2021**

At 30 September 2021 there were 15 current audit action points.

Section 4 **Analysis of Missed Deadlines**

At 30 September 2021 there were 12 audit action points where the agreed deadline had been missed.

Section 5 **Summary of Action Plan Points by Audit Year**

**REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLAN POINTS
SUMMARY OF ACTION PLANS DUE FOR COMPLETION BY 30.09.2021**

SECTION 1

Strategic Area	No. of Actions Due	No. of Actions Completed	Deadline missed Revised date set*	Deadline missed Revised date to be set*
Supply, Distribution and Property	2	1	1	0
Total	**2**	**1**	**1**	**0**

* These actions are included in the Analysis of Missed Deadlines – Section 4

SECTION 2

CURRENT ACTIONS BY STRATEGIC AREA

HSCP	
Due for completion December 2021	1
Total Actions	**1**
Children and Families	
Due for completion December 2021	4
Total Actions	**4**
Community Health and Care	
Due for completion February 2022	3
Total Actions	**3**
Regulatory and Regeneration	
Due for completion March 2022	1
Total Actions	**1**
Housing and Employability	
Due for completion November 2021	1
Due for completion February 2022	1
Total Actions	**2**
People and Technology	
Due for completion March 2022	1
Total Actions	**1**
Supply, Distribution and Property	
Due for completion December 2021	1
Total Actions	**1**
Education, Learning and Attainment	
Due for completion December 2021	2
Total Actions	**2**
Total current actions:	**15**

SECTION 3

Current Internal Audit Action Plans

ⓟ | **154. Charging Policy - Non Residential Services (Report Issued May 2019)**

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
T&PSR/IA AP/735	4. Charging Policy As the Community Based Care Charging Policy - Non Residential Services has not been reviewed for at least eight years and as some parts of the policy requires to be more generic and other parts require to be more specific, it is recommended that the policy be fully reviewed and revised. This will therefore provide more clarity, eliminate ambiguity and make it fit for purpose. It is also recommended that all services be included in the review to ensure input from all areas. In addition, once reviewed, the date of the revision should be recorded on the policy to ensure that there is proper version control. (Medium Risk)	A Charging Policy Review Group has been established on 7th Jan with meetings scheduled for every 2 weeks until end of June. The group includes all Heads of Service, the CFO, some Integrated Ops Managers and social care accountant. The draft Terms of Reference were considered at the 2nd meeting and agreement was reached between HoS about seconding a social worker to support the process. The review will consider the impacts of new Carers Act and Free Personal Care for Under 65 as well as Self Directed Support duties. It will also address the current anomalies/inequities between service users and opportunities to maximise charging in the context of the council's Commercialisation Policy – but within COSLA Guidance. Personal care is defined in legislation. A simple "service user guide" to non-residential charges can be added to the website/leaflet for distribution.	▶	31-Aug-2019 30-Sep-2020 31-Mar-2021	31-Dec-2021*	HSCP Heads of Service	Beth Culshaw

ⓟ | **165. CM2000 Functionality (Report Issued February 2020)**

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/028	Overtime Payment It is recommended that: • all timesheets are checked and agreed to CM2000 system before	We are working with CM2000 to develop a payroll report which will be used as the basis for staff payment. This report will be implemented by September 2020.	▶	30-Nov-2020 31-Mar-	28-Feb-2022*	Richard Heard	Lynne McKnight

Status Key

▶	On track
⬢	Overdue – update required

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
	being authorised for payment; • where there are instances of non-compliant clock in overtime, appropriate additional authorisation should be obtained. (Low Risk)	In the meantime Admin will do cross checks against clocking in and out. A communication will be issued to all home care staff re compliance and claims for overtime.		2021 31-Jul-2021			
IAAP/029	Implementation of additional CM2000 Functionality a) It is recommended that Management pilot and fully implement the Mileage functionality across the Homecare team within the planned time frame. (Medium Risk)	Mileage Wizard will be rolled out in next six months. This will depend on high compliance.	▶	30-Jun-2020 30-Nov-2020 31-Mar-2021 31-July-2021	28-Feb-2022*	Richard Heard	Lynne McKnight
IAAP/030	Implementation of additional CM2000 Functionality b) It is recommended that Management develop a plan in collaboration with WDC ICT and Payroll to implement the Financial module. (Medium Risk)	We are working with CM2000 to develop a payroll report which will be used as the basis for staff payment. This report will be implemented for testing by September 2020	▶	30-Nov-2020 31-Jan-2021 31-Mar-2021 31-Jul-2021	28-Feb-2022*	Richard Heard	Lynne McKnight

Ⓟ **171. Social Work - Case Management (Report Issued August 2020)**

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/048	3. Children's services – Supervision of casework Senior Social Workers (SSWs) should be required to discuss all cases allocated to Social Workers on a regular basis to ensure that appropriate review is taken of lower priority cases and that no cases remain open which should be closed. Performance management information showing cases which have	Supervision with staff covers a range of issues in addition to discussion about cases. Supervision process requires review and update – can reflect frequency of discussions around cases; consider discussion of a certain number of cases in each supervision session. Explore an improved 'Team around the Child' reviewing	▶	31-Mar-2021	31-Dec-2021*	Annie Ritchie	Jonathan Hinds

Status Key

▶	On track
⬢	Overdue – update required

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
	not been updated within a specified period should be obtained to enable SSWs to gain assurance that there are no open cases which are not being actively dealt with. (Medium Risk)	model. Monthly report to managers, Head of Service, HSCP Chief Officer and Council Chief Executive includes breakdown of unallocated cases. Develop management exception report re: cases with no activity recorded for periods of time to provide further scrutiny and assurance.					
IAAP/050	5. Children's Services - Peer review of case files Management should consider what level of peer review is required to ensure that the cases are being recorded adequately and assess how the process can be re established given the current team workloads. (Medium Risk)	Management Team are reviewing peer review processes as part of case file audit and monitoring and how this can inform service redesign. Work has commenced as part of the PACE workstream in respect of children looked after at home. Intention to scale up when capacity is increased.	▶	31-Oct-2020 31-Mar-2021	31-Dec-2021*	Annie Ritchie	Jonathan Hinds
IAAP/052	7. Children's Services - Policies and Procedures Management should review and update the procedures and guidance documents to ensure they provide accurate guidance as to what is required of the social workers. Management should reiterate the importance of all procedures being followed. (Low Risk)	Policies to be reviewed and updated in terms of quality assurance, good practice and service redesign.	▶	31-Mar-2021	31-Dec-2021*	Annie Ritchie	Jonathan Hinds
IAAP/053	8. Children's Services - Performance management information Team Leaders and Senior Social Workers should review the information within the reports and validate the figures being provided. Where necessary a data cleanse process should be carried out to identify open cases which should be closed. The Team Leaders should consider whether the information provided is useful and how they can use it going forward to assist in the planning and review of the work being undertaken within their teams. (Low Risk)	Team Leads and Senior Social Workers to review management information reports and check recording processes to ensure accuracy. As 1b, above Fieldwork managers to review how management reports can support allocation processes and case management planning across teams.	▶	31-Aug-2020 31-Mar-2021 30-Jun-2021	31-Dec-2021*	Annie Ritchie	Jonathan Hinds

Status Key

▶	On track
⬢	Overdue – update required

SECTION 3

Ⓟ | 172. Taxi Licensing (Report issued October 2020)

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/066	Acceptance of Incomplete/ Inaccurate Application forms In the medium term the licensing team should look to phase out paper based applications completely with all licences being required to be submitted online, with originals of documents presented either in the one stop shops or directly to the licensing team. (High Risk)	Paper copy applications will be available in the medium term and the licensing team will work with the Trade to seek to establish a timetable to remove the ability to apply using paper applications.	▶	31-Mar-2022	31-Mar-2022	Raymond Lynch	Peter Hessett

Ⓟ | 173. Housing Voids (Report Issued October 2020)

Code	Recommendation	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/079	1.Void Management Policy Review & Update The Void Management Policy 2013 should be reviewed and updated to take account of current working practices following the 2018 restructure of the Housing Operations Service and the introduction is the new Integrated Housing Management System (IHMS) in October 2019. (Medium Risk)	The previous policy had fallen into abeyance, with the strategic direction for voids led by the Housing Improvement Board. Whereas this has led to significant improvements against the key tenets of the historic policy, given the extent of systemic and structural changes it would be beneficial to codify this within a revised policy. This will be developed with new tenant feedback and wider tenant consultation.	▶	31-May-2021	28-Feb-2022*	Edward Thomas	Helen Black; David Lynch; Edward Thomas

Ⓟ | Cyber Security (Report issued December 2020)

Code	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/081	**User Education and Awareness Training (Amber)** c) Strategic People and Change Manager will progress the development of reports from ilearn	▶	31-Mar-2021	31-Mar-2022*	Strategic Change and	Chief Officer People and Technology

Status Key

7

▶	On track
⬡	Overdue – update required

SECTION 3

Code	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
	which will enable managers to review their teams completion of the ilearn modules and add course to Skills Passport.				People Manager	

P	Building Services – Stock Checks (Report issued May 2021)

Code	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/090	**Lack of Stock Checks on Building Services Vans (Amber)** The increase in imprest stock held in vehicles is part of the introduction of the IHMS. This allows a reduction in trips to depots to uplift stock items allowing right first time repairs and improved service efficiently. Stock checks of vans will be completed in line with monthly stock checks.	▶	30-Jun-2021 31-Aug-2021 30-Sep-2021	31-Oct-2021*	Building Services Manager	Chief Officer – Supply, Distribution and Property

P	Rent Arrears (Report issued July 2021)

Code	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/091	**Lack of Meetings to Monitor Levels of Rent Arrears (Amber)** Management will reinstate performance meetings by Ward.	▶	31-Jul-2021	30-Nov-2021*	Rent Arrears Co-ordinator	Chief Officer – Housing and Employability

Status Key

▶	On track
⬢	Overdue – update required

SECTION 3

	Pupil Equity Fund (Report issued July 2021)
(P)	**Pupil Equity Fund (Report issued July 2021)**

Code	Agreed Action	Status	Original Due Date	Due Date	Assigned To	Managed By
IAAP/095	**Monitoring of procurement spend (Amber)** Management have agreed that when PEF Plans are submitted at the start of each year, a process will be put in place to estimate the value of common spend to the same supplier to reduce the risk of non-compliance with procurement procedures. Educational services plan to use the tracker system already established to assist with this process and will implement consistent use by all schools.	▶	31-Dec-2021	31-Dec-2021	Senior Education Officer	Chief Officer – Learning & Attainment
IAAP/096	**Exit Planning (Amber)** Management have agreed to amalgamate all existing information already shared and any new guidance regarding exit planning into one formalised document.	▶	31-Dec-2021	31-Dec-2021	Senior Education Officer	Chief Officer – Learning & Attainment

Status Key

▶	On track
⬣	Overdue – update required

Report	Agreed Action	Original Due Date	Revised Date	Management Comments
154. Charging Policy - Non Residential Services (May 2019)	**Charging Policy (Medium Risk)** A Charging Policy Review Group has been established on 7th Jan with meetings scheduled for every 2 weeks until end of June. The group includes all Heads of Service, the CFO, some Integrated Ops Managers and social care accountant. The draft Terms of Reference were considered at the 2nd meeting and agreement was reached between HoS about seconding a social worker to support the process. The review will consider the impacts of new Carers Act and Free Personal Care for Under 65 as well as Self Directed Support duties. It will also address the current anomalies/inequities between service users and opportunities to maximise charging in the context of the council's Commercialisation Policy – but within COSLA Guidance. Personal care is defined in legislation. A simple "service user guide" to non-residential charges can be added to the website/leaflet for distribution.	31-Aug-2019 30-Sep-2020 31-Mar-2021	31-Dec-2021	The current Social Care Charging Policy was reviewed during 2020/21 to confirm its compliance with COSLA Guidance as well as undertaking an extensive engagement exercise with service users and stakeholder groups in relation to the current Day Opportunities fixed charge. The feedback from this will be considered alongside the current review into the future model of Day Care Services and any proposed change to the charging structure will be presented to a future HSCP Board meeting with recommendations to be considered by West Dunbartonshire Council as the statutory body with the responsibility to set and levy charges. Day services have been closed throughout 2020/21 (except for some high level support) and the Scottish Government have provided Covid-19 funding to the HSCP to cover the loss of income. It is expected that this will continue into 2021/22. In line with Council's Long Term Financial Strategy current charges will be uplifted by 4% in 2021/22. A report will be presented to HSCP Board in November 2021 and then to Council in December 2021.
165. CM2000 Functionality (February 2020)	**Overtime Payment (Revised to Low Risk)** We are working with CM2000 to develop a payroll report which will be used as the basis for staff payment. This report will be implemented by September 2020. In the meantime Admin will do cross checks against clocking in and out. A communication will be issued to all home care staff re compliance and claims for overtime.	30-Nov-2020 31-Mar-2021 31-Jul-2021	28-Feb-2022 Interim Update	In concert with the national picture care at home continues to be under significant pressure, this is as a result of a complex picture including, the rising rates of covid infection, challenges in terms of absenteeism, recruitment and retention. The service has always benefitted from the mixed economy of service delivery, however as these pressures are mirrored in the independent sector it is becoming increasingly challenging to support the core service with the use of agency workers. Although a project initiation document was agreed on the 14 May 2021, this complex landscape is impacting on the proposed plans to review the service. As such on the 26 August 2021 a phased approach was agreed with Trade Unions colleagues. The initial phase of the service review, which is expected to last approximately 6 months, will focus on compliance with the principles of the Fair Work Framework, specifically in relation to overtime, agency spend, absenteeism, high turnover and compliance with the working time directive.

Report	Agreed Action	Original Due Date	Revised Date	Management Comments
				Meetings have taken place with CM2000 and testing is underway to ensure updated target can be achieved. Additional training is scheduled to commence in November/December to facilitate this.
165. CM2000 Functionality (February 2020)	**Implementation of additional CM2000 Functionality (Medium Risk)** Mileage Wizard will be rolled out in next six months. This will depend on high compliance.	30-Jun-2020 30-Nov-2020 31-Mar-2021 31-Jul-2021	28-Feb-2022 Interim Update	In concert with the national picture care at home continues to be under significant pressure, this is as a result of a complex picture including, the rising rates of covid infection, challenges in terms of absenteeism, recruitment and retention. The service has always benefitted from the mixed economy of service delivery, however as these pressures are mirrored in the independent sector it is becoming increasingly challenging to support the core service with the use of agency workers. Although a project initiation document was agreed on the 14 May 2021, this complex landscape is impacting on the proposed plans to review the service. As such on the 26 August 2021 a phased approach was agreed with Trade Unions colleagues. The initial phase of the service review, which is expected to last approximately 6 months, will focus on compliance with the principles of the Fair Work Framework, specifically in relation to overtime, agency spend, absenteeism, high turnover and compliance with the working time directive. Live monitoring is currently taking place within current constrictions.
165. CM2000 Functionality (February 2020)	**Implementation of additional CM2000 Functionality (Medium Risk)** We are working with CM2000 to develop a payroll report which will be used as the basis for staff payment. This report will be implemented for testing by September 2020.	30-Nov-2020 31-Jan-2021 31-Mar-2021 31-Jul-2021	28-Feb-2022 Interim Update	In concert with the national picture care at home continues to be under significant pressure, this is as a result of a complex picture including, the rising rates of covid infection, challenges in terms of absenteeism, recruitment and retention. The service has always benefitted from the mixed economy of service delivery, however as these pressures are mirrored in the independent sector it is becoming increasingly challenging to support the core service with the use of agency workers. Although a project initiation document was agreed on the 14 May 2021, this complex landscape is impacting on the proposed plans to review the service. As such on the 26 August 2021 a phased approach was agreed with Trade Unions colleagues. The initial phase of the service review, which is expected to last approximately 6 months, will focus on compliance with the principles of the Fair Work Framework, specifically in relation to overtime, agency spend, absenteeism, high turnover and compliance with the working time directive. Live monitoring is currently taking place within current constrictions.

Report	Agreed Action	Original Due Date	Revised Date	Management Comments
171. Social Work - Case Management (Report Issued August 2020)	**Children's Services – Performance management information (Low Risk)** Team Leads and Senior Social Workers to review management information reports and check recording processes to ensure accuracy. Data cleanse to ensure accurate caseloads is being forward by a sub group of the wider team with Information Team colleagues. Fieldwork managers to review how management reports can support allocation processes and case management planning across teams.	31-Aug-2020 31-Mar-2021 30-Jun-2021	31-Dec-2021	Comprehensive data reports being reviewed by Child Protection Lead Officer to focus on key risks and filter out other information with negiligible value. To report first draft to Public Protection Chief Officers Group December 2021.
171. Social Work - Case Management (Report Issued August 2020)	**Children's Services - Peer review of case files (Medium Risk)** Management Team are reviewing peer review processes as part of case file audit and monitoring and how this can inform service redesign. Work has commenced as part of the PACE workstream in respect of children looked after at home. Intention to scale up when capacity is increased.	31-Oct-2020 31-Mar-2021 30-Jun-2021	31-Dec-2021	This work is underway – we have an internal short life working group developing and refreshing the peer review process with the intention that the new process will start in January 2022. Case recording standards are associated with this work and also require to be revised from a child care perspective.
Cyber Security (Report Issued December 2020)	**User Education and Awareness Training (Amber)** c) Strategic People and Change Manager will progress the development of reports from ilearn which will enable managers to review their teams completion of the ilearn modules and add course to Skills Passport.	31-Mar-2021	31-Mar-2022	There are ongoing discussions with WMS in order to create a link between ILearn and HR system.
171. Social Work - Case Management (Report Issued August 2020)	**Children's Services – Supervision of case work (Medium Risk)** Supervision with staff covers a range of issues in addition to discussion about cases. Supervision process requires review and update – can reflect frequency of discussions around cases; consider discussion of a certain	31-Mar-2021 30-Jun-2021	31-Dec-2021	A short life working group will be set up to review the adult services supervision policy and update / revise for child care. In relation to 'Team around the Child' reviewing model, GIRFEC refresh is part of the children's services plan and is a multi agency activity. Timescales for this aspect will be agreed at Nurtured Dig.

Report	Agreed Action	Original Due Date	Revised Date	Management Comments
	number of cases in each supervision session. Explore an improved 'Team around the Child' reviewing model. Monthly report to managers, Head of Service, HSCP Chief Officer and Council Chief Executive includes breakdown of unallocated cases. Develop management exception report re: cases with no activity recorded for periods of time to provide further scrutiny and assurance.			Monthly report with breakdown of unallocated cases to managers, Head of Service, HSCP Chief Officer and Council Chief Executive is in place. Management exception reporting regarding cases with no activity recorded for periods of time to provide further scrutiny and assurance is now in place.
171. Social Work - Case Management (Report Issued August 2020)	**Children's Services – Policies and Procedures (Low Risk)** Policies to be reviewed and updated in terms of quality assurance, good practice and service redesign.	31-Mar-2021 30-Jun-2021	31-Dec-2021	Review of child protection and associated policies is being undertaken by CPC. Case recording and supervision policies are also being reviewed through the work of the short-life working groups.
Housing Voids (Report Issued October 2020)	**Void Management Policy Review & Update (Medium Risk)** The previous policy had fallen into abeyance, with the strategic direction for voids led by the Housing Improvement Board. Whereas this has led to significant improvements against the key tenets of the historic policy, given the extent of systemic and structural changes it would be beneficial to codify this within a revised policy. This will be developed with new tenant feedback and wider tenant consultation.	31-May-2021	28-Feb-2022	The process for revising the policy and approving the current relet standard in the interim has been reported to the Housing Improvement Board. We will then proceed with the tenant and stakeholder consultation which will inform a paper seeking committee approval for both policy and standard in February 2022.
Building Services - Stock Checks (Report Issued May 2021)	**Lack of Stock Checks on Building Services Vans (Amber)** The increase in imprest stock held in vehicles is part of the introduction of the IHMS. This allows a reduction in trips to depots to uplift stock items allowing right first time repairs and improved service efficiently. Stock checks of vans will be completed in line with monthly stock checks.	30-Jun-2021 31-Aug-2021 30-Sep-2021	31-Dec-2021	Pilot project to commence in October on one Building Services van to implement new IHMS process for managing Impress Stock in Vans. This involves a stock check on the Van stock. It is expected that the new process will be implemented for all Building Services vans with Impress stock (24 vans) by 31st December 2021.

Report	Agreed Action	Original Due Date	Revised Date	Management Comments
Rent Arrears (Report Issued July 2021)	**Lack of Meetings to Monitor Levels of Rent Arrears (Amber)** Management will reinstate performance meetings by Ward.	31-Jul-2021	30-Nov-2021	Meetings were started however due to significant absence levels in the wider team these have not been fully embedded. The team is working towards supporting staff to be able to concentrate on the arrears process.

**REPORT TO AUDIT COMMITTEE ON
STATUS OF INTERNAL AUDIT ACTION PLANS
SUMMARY OF ACTIONS BY AUDIT YEAR   SECTION 5**

Status at 30 September 2021

Audit Year	No of Agreed Actions	No of actions complete	Current actions by Grade		
			H	**M**	**L**
2018/2019	79	78	0	1	0
2019/2020	67	57	1	6	3
Total	**146**	**135**	**1**	**7**	**3**

Audit Year	No of Agreed Actions	No of actions complete	Current actions by Grade		
			Red	**Amber**	**Green***
2020/2021	25	14	0	4	7
Total	**25**	**14**	**0**	**4**	**7**

* Green actions are within the Council's risk appetite and are therefore not included in Audit Committee reports.