

Count	Unique Tracker Rec No.	Dir	Audit Title	Recommendation	Rec Yr.	Original Audit Completion Date	Responsible Officer	Responsible Officer Latest Update	Updated on (date)	Status (% Complete)	Current status	Status at previous period
1	202 20/21	DoR	Bank & Cash Reconciliations	The decision not to implement the control designed by the previous Chief Accountant whereby completion of control account reconciliations would be monitored to ensure they are timely, completed satisfactorily and reviewed should be revisited. In the absence of a centrally held list of reconciliation to evidence the monitoring undertaken and to enable any issues or delays to be identified or addressed, it should be determined whether the current arrangements provide a satisfactory alternative.	20/21	16/06/2020	Mark Sanders Chief Accountant	The full list of all control reconciliations has been prepared and is being reported monthly to Finance Transformation Board to manage status any any issues arising.	05 July 2022	Complete	Green	Amber
2	203 20/21	DoR	Bank & Cash Reconciliations	Procedure notes for the completion of reconciliations should be updated and reflect the current process.	20/21	16/06/2020	Mark Sanders Chief Accountant	Main bank rec process clearly documented, transparent, up to date, simple to follow supporting audit trail and confidence as a result. Written procedures for control account/feeder system reconciliations are still work in progress.	05 July 2022	51 to 75	Amber	Amber
3	110 20/21	DoR	Intercompany transfers	Financial Procedures should be updated to reflect the standards and requirements for conducting intercompany accounting and the relationship with the financial coding structure. For example, there should be common standards for substantiating and approving transfers whether these relate to intercompany transactions or not, a procedure detailing the use of the group account use etc.	20/21	15/07/2020	Mark Sanders Chief Accountant Andy Jehan Exchequer Manager	Procedure notes for system Intercompany transfer have been produced. Payments between BFFC and RBC are approved by each respective organisation and processed by AP.	29 June 2022	Complete	Green	Green
4	112 20/21	DoR	Intercompany transfers	The reason for the payment anomalies and queries highlighted in the report should be investigated to help inform the review of the intercompany transfer procedure.	20/21	15/07/2020	Mark Sanders Chief Accountant Andy Jehan Exchequer Manager	The transactional issues raised in the report related to payments made via CHAPS / transfer and have been corrected. The use of non AP methods to make transfers has been discontinued.	29 June 2022	Complete	Green	Green
5	114 20/21	DoR	Intercompany transfers	The procedures for reconciling and monitoring the receipt of SLA income should be urgently reviewed and updated to ensure any payment deviations/variation to the contract sum are highlighted on a timely basis for investigation. This should include: - •The preventative use of CHAPS/SwiftPay •The payment status and variation approvals should become a standard agenda item as part of any regular management contract review procedure. •Procedures governing budgetary control.	20/21	15/07/2020	Mark Sanders Chief Accountant Andy Jehan Exchequer Manager Kate Graefe AD Procurement & Contracts	CHAPS / Swiftpay are no longer used to make inter company payments (MS/AJ) Guidance notes are in progress and will be included as part of the improvement programme. The co-ordination between Finance and Procurement & Contracts on having an agreed joint understanding of any deviations is still not in place, to be picked up Q2/Q3 FY22/23 through the new Strategic Finance Business Partner support for the contract (Stephen MacDonald). Once this is established, the action can move to complete	05 July 2022	76 or more	Green	Green
6	105 20/21	DEGNS	Rent Guarantee Scheme	It is recommended that all housing related systems establish consistent naming conventions that will allow for easy data verification across systems, followed by a data cleansing operation to update current records to the new standard.	20/21	11/08/2020	Christine Denny Housing system project team - Project manager Johnnie Stanley	21/3/22 JS - This task is amber, the officers in Housing don't have the capacity to fully address all data issues. System admins are looking to be hired to fulfill this task. Aimed go live of November 22. OHMs migration project started, the project is addressing how to align the naming convention to GIS/Gazeteer. This will be achieved using the "address matching" module in NPS Housing. Person(s) data is also being standardised where possible.	05 July 2022	26 to 50	Amber	Red
7	138 20/21	DEGNS	Licensing	Given the vulnerability of school transport users, discretionary decisions to allow vehicles to continue to operate when they are in excess of the upper age limit should be well documented, to ensure it aligns with licensing objectives.	20/21	02/12/2020	Clyde Masson, Principal Licensing Officer	We are reviewing out specifications and conditions in respect of School Transport vehicle Licensing to reflect the changes in the industry which include the age of vehicles licensed. We are still reviewing our conditions in respect of all areas of taxi / private hire and private hire (school transport) licencing and are still looking to complete by the end of July 2021 Due to covid there has been a delay in reviewing the conditions. Officers have now revised conditions and are finalising sign off. Aim for end of July. Delays due to staff shortages. Conditions still being finalised aim for completion April 2022. HC Conditions have been consulted on and are being revised taking into account reps from HC trade. Committee date to be arranged. Work on PH (INCLUDES School Transport) will be consulted on thereafter. Revised date is Sept 22	23 June 2022	76 or more	Green	Green
8	139 20/21	DEGNS	Licensing	To maximise the effectiveness of the available enforcement resource, premises enforcement should be formalised by way of a documented risk assessment of type, location and individual premises. Consideration should be given to issuing self-assessment forms to low risk licence holders.	20/21	02/12/2020	Catherine Lewis, Acting Licensing & Environmental Protection Manager	Officers are currently working on producing a self assessment inspection form to be completed by licence holders which will provide a risk level to aid determination whether an officer inspection is required. A self assessment inspection form has been drafted and sent to a sample of the licensed premises within the borough as a trial 15/03/2021 Feedback from the self assessment form has been received and amendments made to the form. A further trial group will be sent the form before the form is actively used for all licensed premises. 8/07/21. Covid has impacted the role out of issuing the self assessment forms due to the follow up needed. The trial has been completed and we are now rolling this out for specific premise types. Starting with off licences.11/01/22Unfortunately there has been a delay to the role out of the self assessment forms due to staffing issues. Officers have compiled a data set for admin support to send out the initial batch of forms within the next 2 weeks. 22/03/22	23 March 2022	76 or more	Green	Green
9	140 20/21	DEGNS	CIL 15% Local Projects	It is recommended that policies and procedures governing CIL, including the 15% aspect, are periodically reviewed and updated to ensure these reflect both the latest local and legislative requirements and that these are updated on the website.	20/21	07/12/2020	Mark Worringham, Planning Policy Manager / Neal Gascoine, CIL Officer	As part of the review mentioned in 140, the process and procedures associated with the delivery of the 15% CIL local schemes is being reviewed to define each of the relevant officers roles within the delivery process of projects funded via the 15% CIL funds. This is linked to 142 below. A revised protocol for allocation of CIL funds was agreed at Policy Committee in February 2021, which particularly sets out procedures for consulting on and allocating 15% local CIL funds. This involves consulting on local priorities every 3-4 years, and the first such consultation took place between 19th February and 16th April. Results were reported to Policy Committee in May 2021 and have informed a new allocation of 15% CIL in March 2022. Processes around the allocation of 80% CIL are now being discussed between Councillors and Finance, and this may lead to procedural changes.	04 July 2022	51 to 75	Amber	Amber

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10	141 20/21	DEGNS	CIL 15% Local Projects	The discrete roles and responsibilities of Planning staff and other staff responsible for the delivery of 15% Local CIL schemes need to be reviewed, understood and adopted by all parties. It is recommended that these are reviewed, documented, approved and then adopted. These should include reference to the work of other services used in the delivery of such schemes, i.e. Legal Services. In particular these should concisely address and include responsibility for: <ul style="list-style-type: none"> • roles and activities of the different services and officers involved • the early capture and recording of the purpose and cost of schemes • the coordination and monitoring of schemes • the timely delivery and reporting of schemes. These guidelines should also define the role(s) of each project officer in respect of their responsibilities for 15% CIL schemes and their commitment to work with and to respond to other officers' enquiries as necessary. Once documented, these roles and responsibilities should be agreed and authorised as appropriate by the CIL Working Group(s) and then copied to 15% CIL scheme managers.	20/21	07/12/2020	Mark Worringham, Planning Policy Manager / Neal Gascoigne, CIL Officer	As part of the review mentioned in 140, the process and procedures associated with the delivery of the 15% CIL local schemes is being reviewed to define each of the relevant officers roles within the delivery process of projects funded via the 15% CIL funds. This is linked to 142 below. The CIL working group has now been running for some time and officers understand the roles related to 15% CIL much better.	04 July 2022	76 or more	Green	Amber
11	150 20/21	DoR	Purchasing cards	Procedures should be established to highlight the cancellation requirements of VPC due to staff leaving or changing role. This should coincide with the usage monitoring controls to identify those cards which are not being used because the cardholder has left the employ of the Council.	20/21	09/12/2020	Andy Jehan Exchequer Manager	A six monthly review will take place in September and April to review card usage.	30/06/2022	51 to 75	Amber	Amber
12	154 20/21	DoR	Purchasing cards	In conjunction with recommendation 8, the Visa Purchasing Cards expenditure categories and respective providers should be monitored to ensure purchases are not being made outside an existing corporate contract, or to ascertaining if there would be a benefit to developing a contract. Prevention controls should be applied to re-enforce the protocols of use in the Visa Purchasing Cards Rules. Appropriate consideration should be given to the different uses by the general services and those purchased for emergency planning.	20/21	09/12/2020	Kate Graefe (AD of Procurement & Contracts)	It is the intention of Procurement & Contracts to commission an external tail-spend analysis across the Council, which would include Purchase Card spend data, to determine whether spend should or could otherwise be routed through a corporate contract or more cost-effective arrangement. Such analysis and work will be shared with Finance to determine if refinement of Purchase Card controls and/or policy is required. Potential funding for this work has been identified. Resource constraints have prevented this from being progressed to date. Separately, a corporate Amazon Business Account has been set up, allowing Procurement & Contracts and Finance to track expenditure via PCards with the organisation. This is now regularised under a YPO framework, providing assurance of compliance with procurement legislation	01 July 2022	26 to 50	Amber	Amber
13	157 20/21	DoR	Purchasing cards	The Council should review the operational platform for managing and accounting for VPC expenditure e.g. an integrated management system that manages the authorisations, records and payments in conjunction with existing/future accounts payable and contract requirements.	20/21	09/12/2020	Mark Sanders Chief Accountant	Existing VPC payment channels will be maintained alongside standard e5 procure to pay processes	29 June 2022	Complete	Green	Red
14	158 20/21	Cross directorate	Records Management & Document Retention	The revised policy needs to be reviewed in conjunction with ICO guidelines (to ensure all areas are covered or reference made to relevant associated policies and legislation). It also needs to clearly define roles and responsibilities, include Council systems and records for obsolete teams, link to the Council's corporate plan, and take an integrated approach to records, regardless of their format. The policy then needs to be formally approved, made available to all staff and included as part of induction for new starters, with regular reviews conducted to ensure compliance. The policy also needs to be fully supported by senior management, with regular updates on progress against the policy provided to them. Where responsibility is delegated to teams and services, there needs to	20/21	15/01/2021	Michael Graham, Assistant Director of Legal and Democratic Services	Actions have been identified and are in hand to be picked up as part of the wider information governance projects which are to be initiated this year. Planning session arranged for 17 Jan 2022 to take this work forward with sign off from the Information Governance Board. The Information Management Strategy has been to Policy Committee, the Information Governance team are working on taking the actions forward. Initial meeting with the Records Management centre completed and work will progress from April 2022. The Information Management Strategy and Action Plan has been signed off by Policy Committee. Next steps is to train the Information Asset Owners and recruit Information Champions across service areas to assist the IG Team with this work. Paper on this has been drafted for CMT to review on 19 July.	04 July 2022	26 to 50	Amber	Amber
15	159 20/21	Cross directorate	Records Management & Document Retention	There needs to be clearly defined links between the Information Governance team, Modern Records and individuals responsible for records management and document retention across the Council. All staff need to be aware of this and consideration also given to documenting this role in relevant job descriptions. Consideration needs to be given to reviewing and rationalising records management risks at corporate and directorate level, distinguishing between strategic risks (reflected at corporate level) and operational risks (reflected at service/team level).	20/21	15/01/2021	Michael Graham, Assistant Director of Legal and Democratic Services	Actions have been identified and are in hand. See comments above.	04 July 2022	26 to 50	Amber	Amber

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16	160 20/21	Cross directorate	Records Management & Document Retention	<p>There should be a centralised register, detailing records held across the Council, their format, location and responsible officer.</p> <p>Consideration also needs to be given to clearly documenting and addressing risks associated to records.</p> <p>Data Protection Impact Assessments (DPIAs) need to be reviewed and updated as necessary to reflect any changes to processes. Where processes have changed (as a result of coronavirus or for other reasons), any associated risks need to be identified and addressed (for example issuing guidance to, and ensuring adherence of, panel members now meeting remotely, on the need for timely, secure destruction of personal sensitive information).</p> <p>Risks relating to records remaining useable need to be identified and appropriate controls put in place.</p>	20/21	15/01/2021	Michael Graham, Assistant Director of Legal and Democratic Services	Actions have been identified and are in hand to be picked up as part of the wider information governance projects which are to be initiated this year. See comments above.	04 July 2022	26 to 50	Amber	Amber
17	161 20/21	Cross directorate	Records Management & Document Retention	<p>There should be a clear understanding regarding roles and responsibilities in relation to old and closed records and action required at the end of retention periods, including for those held in the Modern Records Office and Mosaic.</p> <p>Where possible, retention periods for records should be set on document management systems so that records are automatically destroyed once the end of this period is reached.</p>	20/21	15/01/2021	Nayana George, Customer Relations & Information Governance Manager	Actions have been identified and will be completed as part of the wider Information Governance project. See above comments	04 July 2022	26 to 50	Amber	Amber
18	162 20/21	Cross directorate	Records Management & Document Retention	The revised records management policy needs to include reference to information sharing protocols and/or reference to the relevant documentation and where this is addressed.	20/21	15/01/2021	Nayana George, Customer Relations & Information Governance Manager	Actions have been identified - as above	04 July 2022	26 to 50	Amber	Amber
19	164 20/21	DEGNS	Car Parks (off street)	<p>Procedure notes should be set out for each reconciliation that set out in detail:</p> <ul style="list-style-type: none"> The frequency with which reconciliations should be completed. The format and working papers that are required to be retained. 	20/21	11/02/2021	James Crosbie Assistant Director Paul Allcock Car Parks Manager	<p>Procedure notes written for each reconciliation that set out in detail.</p> <ul style="list-style-type: none"> The frequency with which reconciliations should be completed. Whilst the target will be weekly, due to delays in banking deposits and Oracle, Fortnightly. The format and working papers are retained. Reconciliations will be shown on the 	28/06/2022	76 or more	Green	Green
20	165 20/21	DEGNS	Car Parks (off street)	<p>In conjunction with the Finance Business Partner a reconciliation template should be set out that sufficiently performs the task required and working papers to support the reconciliation should be maintained in an agreed upon fashion. Items to be addressed in the reconciliations should include but not be limited to the following:</p> <ol style="list-style-type: none"> The printed name of the officer that has prepared the reconciliation The signature of the officer that has prepared the reconciliation The date on which the reconciliation has been prepared The printed name of the officer that has check the reconciliation, if different to the approver The signature of the officer that has prepared the reconciliation, if different to the approver The date on which the reconciliation has been checked The printed name of the officer that has approved the reconciliation The signature of the officer that has approved the reconciliation The date on which the approving officer has reviewed the document A record of the unreconciled items for the period and commentary with respect to their cause and treatment. Information recorded within the reconciliation should be sufficient to demonstrate that systems reconcile and links to source data should be included. 	20/21	11/02/2021	Alyson Few Finance Business Partner Paul Allcock Car Parks Manager Janet Ofili Car Park Administration Officer	A review of the existing spreadsheet is ongoing and will be appropriately updated following this review.	26/06/2022	76 or more	Green	Green
21	175 20/21	RES	Housing Revenue Account	Consideration should be given to conducting reviews of various areas (such as service charges and cleaning services) with a view to obtaining improved value for money.	21/22	06/04/2021	Zelda Wolffe Assistant Director of Housing	Service Charge Review programmed to be carried out in 22/23	01 July 2022	76 or more	Green	Green
22	177 20/21	RES	Accounts Payable	Documented processes for all areas of operation linked to clearly defined roles and responsibilities for members of staff. There should be monthly reporting on performance against KPIs available to the organisation and management.	21/22	09/04/2021	Andy Jehan Exchequer Manager Mark Sanders Chief Accountant	This is being Addressed as a part of the Finance Improvement Programme, which is reviewing end-to-end processes. KPIs are being produced to improve management information and highlight areas of concern. The production of these KPIs has been incorporated to the reporting requirements for the new finance system to ensure that these can be produced without manual intervention.	30/06/2022	Complete	Green	Green
23	178 20/21	RES	Accounts Payable	Supplier set up process need review to understand the volume requirements for certain types of supplier and how effective control over verification can be established.	21/22	09/04/2021	Kate Graefe (AD of Procurement & Contracts)	Ongoing monitoring as part of the supplier set-up process and data capture to understand the base data before proposed solutions are determined/ assessed. Data available now for approx. 11 months. To link to proposed commission of tail spend review for ways to manage demand to be delivered in FY 22/23	01 July 2022	51 to 75	Amber	Amber

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24	179 20/21	RES	Accounts Payable	There should be a reporting framework that identifies and records where there are outstanding invoices awaiting processing and days taken to process invoices. If possible, every area of the authority should receive management information regarding outstanding overdue payments and be encouraged to report if there are issues in their areas with outstanding unprocessed invoices.	21/22	09/04/2021	Andy Jehan Exchequer Manager	This is being Addressed as a part of the Finance Improvement Programme, which is reviewing end-to-end processes. KPIs are being produced to improve management information and highlight areas of concern.	30/06/2022	Complete	Green	Green
25	182 20/21	RES	General Ledger	There should be an agreement/understanding put in place between the Council and Brighter Futures for Children, to ensure a common understanding as to where supporting documentation relating to part Brighter Futures journals is held, including right(s) of access for relevant RBC staff (if held by Brighter Futures). Consideration should also be given to agreeing and documenting a	21/22	01/06/2021	Stuart Donnelly Financial Planning & Strategy Manager Jenny Bruce Financial Systems Manager	A new working group has been established to give consideration to key financial systems issues and this recommendation will now be progressed through this group. This specific task has been delayed due to recent unavailability of key staff and other corporate priorities.	29 June 2022	25 or less	Red	Red
26	183 20/21	RES	General Ledger	Journal reports should be run and reviewed on a regular basis by Finance, to include monitoring numbers of journals being raised, raised but not authorised, who is authorising them and any unusual activity, emphasising that "first time right" principle should be adopted where possible.	21/22	01/06/2021	Mark Sanders Chief Accountant	Journal transactions reports will be run to support the final accounts external audit sample testing work, and thereafter will be produced on a regular basis and reviewed by the Chief Accountant reporting exceptions and any unusual activity to the Finance Leadership Team.	29 June 2022	76 or more	Green	Red
27	184 20/21	DEGNS	Travel Demand Management Grant	Transport should produce a register of all expected grant funding for the financial year together with their appropriate grant determination notices, letters and guidance of usage, so that the necessary accounting and auditing resource and scheduling arrangements can be put into place to meet the required deadlines. This will help: - •Mitigate repayment or missed claim risks which could seriously impact	21/22	24/06/2021	Chris Maddocks Strategic Transport Manager Alyson Few Business Partner DEGNS	Sharepoint site for Grant Register has been setup - Transport and Finance are collating all of the relevant information and uploading to the site. Monitored in Budget monitoring each month.	23/06/2022	51 to 75	Amber	Amber
28	185 20/21	DEGNS	Travel Demand Management Grant	Checks need to be put into place within the Service and Finance to ensure grant income is received and posted to the correct Fusion further analysis code to ensure the grant is specifically accounted for. This is particularly important where the accounting involves identifying and differentiating between: - •Capital and revenue grants •Ring-fenced grants •Repayment of unspent / unallocated grants	21/22	24/06/2021	Chris Maddocks Strategic Transport Manager Alyson Few Business Partner DEGNS	Sharepoint site for Grant Register has been setup - Transport and Finance are collating all of the relevant information and uploading to the site. Monitored in Budget monitoring each month.	23/06/2022	51 to 75	Amber	Amber
29	186 20/21	DACHS	Mosaic Payment Controls	The Assessment and Planning Tool (APT) needs to be completed, authorised and signed off in a timely manner to ensure that appropriate services can be put in place.	21/22	01/07/2021	Sunny Mehmi Locality Manager, Adult Care	This is monitored closely in DACHS Operations by Team Managers using reporting. Any themes identified that create barriers to this are shared via the DACHS Performance Board for discussion and resolution. A specific report has been written identifying APTs that are open more than 4 weeks which is discussed at the Performance Board for focus.	23/06/22	76 or more	Green	Green
30	187 20/21	DACHS	Mosaic Payment Controls	All purchase orders should be raised in a timely manner on Mosaic to ensure commitments are accurately reflected, with invoices always attached to the relevant transaction in Oracle Fusion as supporting evidence. To assist in this process, the APT needs to be completed to allow the workflow to be generated in Mosaic.	21/22	01/07/2021	Melissa Wise, Deputy Director - Commissioning & Transformation Andrew Jehan Acting Accounts Payable and Accounts Receivable Manager	Rigour around the time spent for Purchase Orders to be raised on the back of a completed APT is in place via Audits. We have assurances that this is the case as the PBST Senior Officer regularly verifies cases and their payment status. Any issues relating to delays are escalated to the DACHS Performance Board. The Personal Budget Support Team cannot raise a Purchase Order until the APT is finished as per the current MOSAIC process which is in line with Purchase to Pay principles. The timeliness of APTs being completed sits as an Adult Social Care Operational Responsibility (see other recommendation 186 20/21) and is also being addressed.	01/07/2022	76 or more	Green	Amber
31	188 20/21	DACHS	Mosaic Payment Controls	Service user reviews should be conducted in a timely manner to ensure that provision meets, and continues to meet, 'service users' needs. Any changes to service provision should also be reflected on Mosaic in a timely manner. This helps to ensure accurate reflection of financial commitments and avoid over/underpayment of providers.	21/22	01/07/2021	Sunny Mehmi Locality Manager, Adult Care	A DACHS Transformation Project and associated Project Board is in place to provide rigour and oversight on Reviews. This includes looking at our approach to Reviews and ensuring they are proportionate to the situation. Timeliness of Reviews is monitored via the DACHS Performance Board.	01/07/2022	76 or more	Green	Amber
32	189 20/21	DACHS	Mosaic Payment Controls	As a priority, supplier prepayment balances due to Covid need to be reviewed to determine if they relate to services provided not yet invoiced, overpayment of suppliers or a combination of both. Where overpayment is identified, a documented arrangement needs to be put in place with the providers to recoup the additional amount paid.	21/22	01/07/2021	Claire Gavagan DACHS Strategic Business Partner	Linked to 216 20/21 & 218 20/21 Ongoing recovery work is underway, with targetted resources to ensure this is resolved. Any prepayment remaining balances are being offset against current invoices where agreements have been reached with Providers. Agreements are in place for a number of Providers where the balance is being reduced each month. For all other Providers contact has been made with each Provider and agreements to recover the balance of any prepayment are being established. Balances will be cleared for each Provider based on their ability to pay. For some this will be over three months (preferred option) and for others we have a request to recover the balance over 12 months. Work is ongoing to ensure engagement is maintained with all Providers. This work was being completed by Neil Sinclair who has now left RBC Full notes have been provided, with many providers with plans in place or invoices raised. Further work required, once full review of work completed to date confirmed	01/07/2022	51 to 75	Amber	Amber

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33	193 20/21	DEGNS	Commercialisation	<p>a)The cost models developed for commercialisation workstreams should be reviewed and an assessment made of the potential risks associated with estimated as opposed to actual staff costs, alongside periodic reviews to ensure that they are performing appropriately.</p> <p>b)Where it is felt necessary mitigations should be implemented e.g. mechanisms for recording the actual staff time.</p> <p>c)The program for the development of cost model by the Cost Model Accountant should be reviewed and progress determined, and a decision made as to how to progress it if necessary.</p>	21/22	16/07/2021	Marcus Hermon, Business Development Manager	a) The existing cost models used by EBCS are the subject of both annual and mid-year review to ensure they perform appropriately. Extra-ordinary reviews/updates are also undertaken in the event that third party/material costs alter during the course of the year and revised market rates are required to be reflected in the associated schedules. b) Services are required to record the amount of time a job takes and to retrospectively compare this to the amount of time quoted. This learning enables better informed (if required) forecasting of resource requirements and their pricing. National schedules of rates are subscribed to and used in order to benchmark the Council's performance against the market/industry as a whole. This work is underway and it is hoped that it will be further supported by the additional functionality of the Council's new FMS 'Advanced'. c) Some service areas now feel equipped to continue this work within existing resources and will continue to make progress as required. Where services require specialist support due to complexities of legislation and/or financial records, assistance will be sought in consultation with the Director of Finance on a ROI/Risk of challenge basis.	21/03/2022	Complete	Green	Green
34	194 20/21	DEGNS	Facilities Management	<p>The list of properties held on Planet FM should be reconciled periodically by Property Services against the list of properties held by Valuations.</p> <p>This list should then be used to verify the Council's legal repair obligations for both its corporate, non-corporate and other service level agreement requirements to ensure there are no omissions in the scope or repair obligations.</p>	21/22	28/07/2021	Mark Atree, Engineering Services Manager Amanda Burton, Property and FM Technical Team Manager	The list of properties have now been reconciliation completed 09/07/2021. The list includes all properties in which the council has an interest however Valuations need to confirm RBC responsibilities for leased property where it exists. Still awaiting a response	29/6/2022	51 to 75	Amber	Amber
35	195 20/21	DEGNS	Facilities Management	A project plan needs to be produced to ensure the information on the FM register is complete and accurate. The aim should be to ensure current and future information is recorded consistently.	21/22	28/07/2021	Mark Atree Engineering Services Manager Amanda Burton Property & FM Technical Team Supervisor	Responsible Officer for Planet data identified and in place - Amanda Burton. The responsible officer will ensure consistent an accurate data in the future. Requirements and principles of planet operation agreed and in place. M&E assets have been varified and are to be uploaded into the new Planet FM asset management database and the old database closed down.	29/6/2022	Complete	Green	Amber
36	196 20/21	DEGNS	Facilities Management	The protocol, process map and definitions for assessing the different risk priorities should be appropriately approved by management and documented to ensure works are appropriately scheduled for repair. For example, it should be clear what factors determine whether a job is a priority 1 or a priority 2 task.	21/22	28/07/2021	Mark Atree Engineering Services Manager Amanda Burton Property & FM Technical Team Supervisor Glyn Bethell, Corporate Facilities Manager	Proposed priorities identified and descriptions have been produced. The revised priorities and descriptions have been embedded as part of the Planet project.	29/06/2022	Complete	Green	Amber
37	198 20/21	DEGNS	Facilities Management	Exception reports should be produced and monitored showing the reason(s) for delay(s) and should be used, managed and assessed for follow up investigation and action. Prolonged or excessive delays should be reported to the CRG for strategic consideration and decision.	21/22	28/07/2021	Mark Atree Engineering Services Manager Amanda Burton Property & FM Technical Team Supervisor	Weekly reports are produced identifying work not completed and a proactive approach is in place. Customer fulfillment will attend contractor monthly meetings. All issues may not be fully resolved until the Planet project is complete and the portal is operational and all contractors are using - above process is in place and the Planet project is proceeding	29/06/2022	51 to 75	Amber	Amber
38	199 20/21	DEGNS	Facilities Management	Facilities Management and Property Services should provide the AD of Property & Asset Management, Regeneration & Assets with an assurance that none of the outstanding works and actions unduly compromise the health and safety at or of the Council's corporate assets.	21/22	28/07/2021	Mark Atree Engineering Services Manager Amanda Burton Property & FM Technical Team Supervisor	Weekly report produced identifying work not completed proactive approach in place. Contractor meetings are held monthly. Planet is updated where gaps are identified in contractor meetings. All issues may not be fully resolved until the Planet system has been updated to include all assets and PPMs and the portal is operational and everyone is using. Even at this stage there will still be some residual risk. H&S is an agenda item at the Property and Assets team meeting.	29/06/2022	51 to 75	Amber	Amber
39	200 20/21	DEGNS	Facilities Management	We fully support the product review being undertaken of this area by Corporate Procurement and recommend this should include any issues arising from: - •Lessons learnt from the contract management / provider experience •any developing or emerging service issues arising from contractor performance and/or business transformation improvement	21/22	28/07/2021	Mark Atree, Engineering Services Manager Glyn Bethell, Corporate Facilities Manager	Addressing outstanding work via the production of weekly job reports from Planet works reordering system and regular meetings with contractors at which the Property and FM Technical Team and Property Services attend. Working with Procurement Officer Steve York to forward for all Plan contracts. Working towards contractors using Planet Portal so that work detail and progress are current. The project to re-launch Planet with cleansed data, PPM schedules and a suite of suitable reports has gone live in Feb22. All jobs being raised on the portal,	29/06/2022	51 to 75	Amber	Amber
40	201 20/21	DEGNS	Facilities Management	The placement of contracts, existence and type of contract agreements held should be confirmed by Property Services and Facilities Management to demonstrate compliance with the Public Contract Regulations	21/22	28/07/2021	Mark Atree, Engineering Services Manager Glyn Bethell, Corporate Facilities Manager	We are working closely with Procurement Officer Steve York and updating the contracts register database regularly along with contract to forward planning. All contracts held are available for scrutiny. Lack of human resource has been for a number of years and continues to be a significant issue. This should be addressed in the proposed re-structure but until then, progress is and will continue to be slow.	29/06/2022	51 to 75	Amber	Amber

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41	202 20/21	DACHS	Contract Management	<p>The contract management framework should be reviewed, re-formularised and approved on an annual basis to ensure this remains fit for purpose for ensuring compliance with Contract Procedure Rules. The purpose of this is to embed continual improvement to manage the contract or supplier delivery risk throughout the commissioning and contract lifecycles. This should include: -</p> <ul style="list-style-type: none"> •A contract management framework and Commissioning Strategy to demonstrate how the Council will manage the supply and demand risk, the quality care risk and what the role of contract management should be within adult social care. •Contract management procedures, workflow processes, resources, risk evaluations, the monitoring and reporting approach should be produced to ensure the ASC contractual requirements deliver the specified outcomes e.g. from a risk perspective, what constitutes a successful or failed contract 	21/22	09/09/2021	Lara Fromings - Head of Commissioning	Contract management meetings are scheduled with all block contracted providers to support good commercial delivery throughout the lifecycle of the contract. Officers are completing Foundation Level Contract Management Training. Contract management will be on a risk based approach, with greater resource focused on higher value, business critical contracts. Documentation to support the contract management framework needs to be finalised. The Commissioning Service team and resource is being reviewed. Quality functions will move from Commissioning to the DACHS Quality and Safeguarding Team over the next 6 months.	01 July 2022	51 to 75	Amber	Amber
42	203 20/21	DACHS	Contract Management	<p>An integrated contract register, and workflow/document management system should be considered to account for all contracts. This will help provide more effective, efficient, and secure contract management and monitoring platforms for monitoring all ASC contract and supplier provisions.</p> <p>As a minimum, reconciliation controls against Mosaic and Fusion should be established to ensure the completeness of provider records held on the contract register, especially where the term of the provision is £5k or more.</p>	21/22	09/09/2021	Lara Fromings - Head of Commissioning	Additional resource is being recruited to support delivery of this action during this financial year. This will ensure that all spot purchased contracts are included on the Intend Contract Register and contractual information verified on Fusion.	01 July 2022	51 to 75	Amber	Amber
43	204 20/21	DACHS	Contract Management	<p>Internal Audit fully support the ASC review to confirm the completeness of all contract documentation, but we recommend this is completed against the core care records on Mosaic as the contract registers are incomplete.</p> <p>This review could be used as the basis for confirming compliance with</p>	21/22	09/09/2021	Lara Fromings - Head of Commissioning	Commissioned contracts are reflected on the Intend Contract Register. During the coming year all spot purchased contracts will be included on the Intend Contract Register.	01 July 2022	51 to 75	Amber	Amber
44	205 20/21	DACHS	Contract Management	<p>The existing monitoring and reporting controls should be developed to provide timely and effective assurance to senior management on the status of: -</p> <ul style="list-style-type: none"> •Strategic commissioning risk, •Contractual and service delivery risk of providers, •Compliance within ASC and with providers, •The completion of contractual documentations. 	21/22	09/09/2021	Lara Fromings - Head of Commissioning	A work plan is in place to support the Commissioning Team with governance structures in place, including the DACHS Commissioning & Procurement Board which been established and will provide oversight.	01 July 2022	51 to 75	Amber	Amber
45	210 20/21	DEGNS	Staff vehicle documentation (grey fleet)	<p>The existing draft grey fleet policy needs to be formally and appropriately approved, launched and then made widely available across the Council. It also needs to be included within the new starters' induction process. Prior to approval, the revised policy needs to be reviewed to ensure it still meets all necessary legislation/regulation etc.</p> <p>However, online managers guidance would benefit from review and updating to reflect the new process and the launch and training of the new process needs to emphasise roles and responsibilities.</p>	21/22	18/11/2021	Teresa Kaine HR Services Manager	The policy has now been reviewed and updated and all necessary legislation/regulatory requirements have been met. The policy has been agreed by the TUs and Personnel Committee in March 2022. The policy has been formally signed by the TUs and has been uploaded to the Intranet. A communication to all managers and staff will be going out week beginning 4 July 2022.	27 June 2022	51 to 75	Amber	Amber
46	211 20/21	DEGNS	Staff vehicle documentation (grey fleet)	<p>Once agreed and launched, the policy will need to be implemented to ensure that checks are conducted consistently and on a minimum of an annual basis. Original/copies of documentation will not now need to be kept.</p> <p>Once the new grey fleet policy is in place, details of all checks should be recorded on iTrent with a monthly sharing of data between Fleet (Fleetwave) and HR (iTrent) to ensure consistency.</p> <p>There needs to be a thorough review of the data held on iTrent in relation to grey fleet/RBC drivers to ensure data is up to date, not duplicated and that drivers are correctly designated (grey fleet/RBC).</p>	21/22	18/11/2021	Teresa Kaine HR Services Manager Ben Morgan HR Data Systems Officer / Resourcing Manager Ben Morgan HR Data Systems Officer / Resourcing Manager	Once the policy is agreed and launched, managers will need to refer to the policy to make sure they understand their responsibilities and ensure that checks are conducted consistently and on an annual basis as a minimum. Original/copies of documentation will not now need to be kept. A process is now in place to upload, share and cross reference data between Fleetwave and Itrent to ensure consistency and as part of this a data clean exercise has been undertaken to ensure accuracy.	28 June 2022	51 to 75	Amber	Amber
47	214 20/21	DEGNS	Staff vehicle documentation (grey fleet)	<p>The roles and responsibilities of employees and managers in relation to grey fleet checks need to be clearly communicated and managers and staff educated as to what needs to be completed and when in relation to grey fleet checks. This could form part of the launch of the new policy.</p>	21/22	18/11/2021	Teresa Kaine HR Services Manager Ben Morgan Resourcing Manager	Online guides are available for both employee and managers, which will be promoted upon policy launch and highlighted as a permanent item in Itrent company news, on both the employee and manager portal. Information has been added to all email alerts reminding them that an up to date drivers check must be recorded in iTrent for them to approve the claim.	27 June 2022	51 to 75	Amber	Amber

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48	215 20/21	DEGNS	Staff vehicle documentation (grey fleet)	There needs to be monitoring and reporting of compliance, as appropriate, once the policy has been formally agreed and implemented, with particular consideration given to having a regular report provided to senior management on grey fleet and compliance and feedback to managers on key issues also included. Reporting capability needs to be clarified, with reports containing key information being produced in a timely and accurate manner and necessary action taken to address issues identified, including non-compliance.	21/22	18/11/2021	Teresa Kaine HR Services Manager Ben Morgan Resourcing Manager	Reporting capability is in place, enabling non compliance to be followed up	27 June 2022	51 to 75	Amber	Amber
49	216 20/21	DEGNS	Staff vehicle documentation (grey fleet)	Firmer action needs to be taken where checks have either not been undertaken or are not up to date and/or not appropriately recorded, making it clear to staff and managers alike that expenses cannot be paid without these being in place.	21/22	18/11/2021	Teresa Kaine HR Services Manager	The policy makes line manager responsibilities very clear. Where checks have not been undertaken or are not up to date the matter will be escalated through the management line.	27 June 2022	51 to 75	Amber	Amber
50	220 20/21	DEGNS	Housing Allocation Scheme	Housing Needs should ensure that there are clear audit trails for the shortlisting and viewings/offers processes. Shortlists should be closed down correctly and in a timely manner on Locata after shortlisting is completed to provide an accurate audit trail, evidence of banding documented/retained and a copy of the short list (with any relevant annotations) retained as part of the audit trail. There should also be clear evidence of successful applicants being invited to attend property viewings and an audit trail that shows when properties were viewed and offers made and accepted. There should also be evidence that letters have not been sent to successful bidders with a formal offer until all required information has been received and verified	21/22	29/11/2021	Gemma Northway Voids & Lettings Team Manager	Following further investigation on this point, management have spoken to the Officers to ensure that they are aware of the impact of closing the shortlists in a timely manner, however we are reliant on information being shared by our Registered Provider partners to ensure this is completed fully. Processes have been updated to reflect this point to ensure that there is a clear audit trail. Some of this concern is a result of our current system which we are unable to modify. A new system is due to be implemented in October 2022 and this point has been carefully considered to ensure it is not a problem replicated in the new system. 23/06 New system going live mid November 2022.	23 June 2022	51 to 75	Amber	Amber
/	221 20/21	DACHS	Adult Provider Payments	There needs to be a full set of documented processes that address all control weaknesses which are reviewed by internal audit to determine their adequacy. This needs to include a clear, documented process for applying all agreed inflationary increases to providers in the future. Also clearly documented roles and responsibilities need to be included, as well as what information should be provided and appropriate checks/validations to ensure that the information is complete and accurate. Details should also include how inflationary increases are carried out and that there is suitable review/authorisation of key processes.	21/22	13/01/2022	Darren Carter Director of Finance Melissa Wise Deputy Director for Adult Social Care	A new inflationary uplift process alongside a suite of documentation clarifying roles and responsibilities and the associated operating procedure has been tested and implemented. This includes independent checks at key stages of the process to ensure there are no errors. This will be reviewed in October to ensure it is fit for purpose and to iron out any issues. In terms of levels of authorisation additional guidance has been issued to DACHS staff to reinforce the Financial Controls in place and staffs requirement to adhere to them.	01 July 2022	76 or more	Green	Green
52	222 20/21	DACHS	Adult Provider Payments	Information provided to request uplifts to be actioned needs to be accurate and comprehensive, clearly detailing all relevant information. It needs to clearly detail the provider(s) and service users to whom the uplift should be applied, the date from which the uplift is to be applied (and end date if relevant), the current rate, the uplifted rate and the percentage increase. There also needs to be clearly documented evidence that any uplift has been appropriately approved (for example by DMT) and that the information provided has been reviewed by a second Officer to confirm accuracy. Lastly, evidence of the request to action uplifts and appropriate authorisation needs to be retained in a central location/on the relevant service users' record(s).	21/22	13/01/2022	Lara Fromings - Head of Commissioning Darren Carter Director of Finance Melissa Wise Deputy Director of Adult Social Care	See Unique Tracker Rec No. 221 20/21	01 July 2022	Complete	Green	Green
53	223 20/21	DACHS	Adult Provider Payments	Linked to clarification of roles and responsibilities in the uplift process, Officers also need to ensure that their knowledge of organisational structure is up to date and that queries/requests for action are addressed to the correct Officers. Legacy AP email inboxes need to be closed/made inactive and automatic messages added to them signposting to the relevant up to date/central inbox to ensure a (timely) response to queries	21/22	13/01/2022	Darren Carter Director of Finance Melissa Wise Deputy Director of Adult Social Care	See Unique Tracker Rec No. 221 20/21 The revised uplift process includes clarification of the roles/Officers to escalate too should there be queries. All Legacy AP email inboxes have been closed with an automated message being generated.	01 July 2022	Complete	Green	Green
54	226 21/22	DACHS	Adult Provider Payments	There needs to be a full review to determine whether the correct inflationary uplifts have been applied to current service provisions. This also needs to include review of client contributions to determine whether these have been impacted where rates have been incorrectly amended	21/22	13/01/2022	Lara Fromings - Head of Commissioning	All payments were reviewed to ensure accuracy. A robust process is in place to ensure application of inflationary uplifts for people who fund their own care (client contributions) where we make arrangements on their behalf.	1st July 2022	Complete	Green	Amber
55	229 21/22	DACHS	Adult Provider Payments	Providers should be contacted in all cases where a balance remains on the prepayments, details of the overpayment provided, and a clear agreement reached as to how any overpayment will be recovered. This should be clearly documented.	21/22	13/01/2022	Claire Gavagan DACHS Strategic Business Partner	Linked to 216 20/21 & 218 20/21 Ongoing recovery work is underway, with targetted resources to ensure this is resolved. Any prepayment remaining balances are being offset against current invoices where agreements have been reached with Providers. Agreements are in place for a number of Providers where the balance is being reduced each month. For all other Providers contact has been made with each Provider and agreements to recover the balance of any prepayment are being established. Balances will be cleared for each Provider based on their ability to pay. For some this will be over three months (preferred option) and for others we have a request to recover the balance over 12 months. Work is ongoing to ensure engagement is maintained with all Providers. This work was being completed by Neil Sinclair who has now left RBC Full notes have been provided, with many providers with plans in place or invoices raised. Further work required, once full review of work completed to date confirmed	01 July 2022	51 to 75	Amber	Amber

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56	230 21/22	DACHS	Adult Provider Payments	Correct invoices should be attached in all cases to the relevant transactions in Oracle Fusion as supporting evidence.	21/22	13/01/2022	Andy Jehan Exchequer Manager	AP staff are ensuring that all new invoices are attached promptly once the invoices have been interfaced from Mosaic to Fusion. They are currently working on a historic backlog.	30/06/2022	76 or more	Green	Amber
57	231 21/22	DACHS	Adult Provider Payments	There should be consistent and appropriate treatment of offsetting provider invoices against prepayments including coding to the appropriate accounts.	21/22	13/01/2022	Claire Gavan DACHS Strategic Business Partner	Linked to 216 20/21 & 218 20/21 Ongoing recovery work is underway, with targeted resources to ensure this is resolved. Any prepayment remaining balances are being offset against current invoices where agreements have been reached with Providers. Agreements are in place for a number of Providers where the balance is being reduced each month. For all other Providers contact has been made with each Provider and agreements to recover the balance of any prepayment are being established. Balances will be cleared for each Provider based on their ability to pay. For some this will be over three months (preferred option) and for others we have a request to recover the balance over 12 months. Work is ongoing to ensure engagement is maintained with all Providers. This work was being completed by Neil Sinclair who has now left RBC Full notes have been provided, with many providers with plans in place or invoices raised. Further work required, once full review of work completed to date confirmed	01 July 2022	51 to 75	Amber	Amber
58	232 21/22	DACHS	Adult Provider Payments	The communication / notification link between PBST and AP needs to be restored to include regular sharing of details of mismatched and rejected invoices. Wider issues identified during the review of on hold and rejected invoices also need to be addressed. Reestablishment of link between AP and PBST will help with some of these but issues such as suspension/unsuspension of care packages, timely setting up of services and actioning of hospital discharges on Mosaic need to be addressed as part of wider data quality/training issues. In addition, the backlog of invoices on hold/rejected/awaiting processing needs to be addressed.	21/22	13/01/2022	Andy Jehan Exchequer Manager Steve Saunders Principal Personal Budget Officer Lara Fromings Head of Commissioning	Shared invoice queries spreadsheet established on Sharepoint, giving both PBST & AP team members access to a live list of queries and their status. Monthly meetings in place for both teams to discuss progress and challenges.	30/06/2022	Complete	Green	Green
59	233 21/22	DACHS	Adult Provider Payments	Automatic, system-generated remittance advice slips need to be reinstated for all payments to providers to ensure clarity around payments made.	21/22	13/01/2022	Darren Carter Director of Finance Claire Gavan Strategic Business Partner	Officers have been working with the Council's IT Providers to find a technical solution for generating remittance advices. Thus far this has not resulted in a successful solution as the Providers offer would require the Council to reduce its security which is not an option. Requests have been logged to the Provider to undertake further development but the timetable on this has not been committed to. In the meantime remittance advices are being generated manually upon request but the lack of them continues to create issues with Payments and results in increasing queries.	01 July 2022	25 or less	Red	Red
60	234 21/22	DACHS	Adult Provider Payments	The ASC Scheme of Delegation needs to be formally updated, documented, approved and made available to those who require it and followed.	21/22	13/01/2022	Darren Carter Director of Finance Seona Douglas Executive Director for Health & Social Care	As an interim measure communication has been circulated to all Officers clarifying the Financial Controls in Adult Social Care and expectation around authorisations. Interim measure Completed as of 28/03/2022 is in the DACHS policies and procedures SharePoint Site A revised Scheme of Delegation for DACHS has been prepared for discussion with wider stakeholders and alignment with the Council's Constitution. 29/06/2022 SD: Work continues with regards to the scheme of delegation samples from other LAS received a draft will be available, w/c 15th August 2022	01 July 2022	51 to 75	Amber	Amber
61	235 21/22	DACHS	Adult Provider Payments	An appropriate performance framework needs to be put in place to assist with identifying quality issues. This needs to define what good performance is and what performance should be measured against.	21/22	13/01/2022	Joanne Lappin Assistant Director, Safeguarding, Quality, Performance & Practice	Work to strengthen the existing Performance Framework is underway to clarify expected standards and timeframes	01 July 2022	76 or more	Green	Green
62	236 21/22	DACHS	Adult Provider Payments	Managers need to ensure that information on weekly dashboards (for example in relation to open APTs and reviews) is reviewed and actioned as appropriate by / with team workers.	21/22	13/01/2022	Joanne Lappin Assistant Director Operations and Safeguarding, Quality, Performance and Practice	A weekly ASC Performance Report is being sent to all Managers in ASC for review and action as appropriate. Performance against expected standards is monitored at each Monthly Performance Board attended by all managers.	01 July 2022	76 or more	Green	Green
63	237 21/22	DACHS	Adult Provider Payments	There needs to be regular review/monitoring and reporting of data quality, for example of APTs completed within a required timeframe, care packages input/amended/closed on Mosaic in a timely manner and appropriate action taken for any issues identified, to ensure only relevant/appropriate information is being recorded on service users' records.	21/22	13/01/2022	Joanne Lappin Assistant Director of Safeguarding Quality Performance and Practice	Weekly data is provided to Operational Managers to enable them to review data quality and ensure management oversight. The Performance Board is responsible for a monthly audit of data quality to ensure consistency of reviewing and monitoring. Weekly data includes safeguarding and DoLS.	01 July 2022	76 or more	Green	Green
64	239 21/22	DACHS	Adult Provider Payments	APTs need to be completed in a timely manner, the service input onto Mosaic and a PO raised to ensure services and financial commitments are accurately reflected. There needs to be appropriate review of decisions approved at ERRG to ensure timely actioning of agreed services and input onto Mosaic.	21/22	13/01/2022	Melissa Wise Deputy Director for Adult Social Care Joanne Lappin Assistant Director of Safeguarding Quality Performance and Practice	A review of all processes that result in purchasing services is underway across DACHS to ensure a) expectation of staff are clear, b) roles and responsibilities are clarified, c) opportunities to improve the systems are taken. Staff are engaged fully in this process which will also result in a standard operating procedure.	01 July 2022	76 or more	Green	Amber

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65	240 21/22	DACHS	Adult Provider Payments	Reasonableness checks should be carried out by Commissioning when unusual payments are identified to determine and ensure whether the proposed payment amounts are within likely amounts to be paid. Amendments made to Mosaic which do not have an agreed workflow process (such as inflationary uplifts) need then to have additional independent checks in place/exception reporting to ensure that amendments made are appropriate.	21/22	13/01/2022	Lara Fromings - Head of Commissioning	See 221 20/21 & 223 20/21 The process for adding inflationary uplifts has been fully implemented and will be reviewed in October 2022.	1st July 2022	Complete	Green	Green
66	241 21/22	DACHS	Adult Provider Payments	New starters need to be given appropriate training and provided with relevant policies and procedures for work on Mosaic and the need to follow these enforced. Consideration also needs to be given as to how working practices can be adopted to ensure adequate support for the workers when working remotely.	21/22	13/01/2022	Sunny Mehmi Assistant Director of Operations Social Care Systems Manager	All team now have standard operating procedures which include the requirements on the use of mosaic and have been passed to staff. The MOSAIC training offer has been revised to provide a combination of classroom based and online training. For all new starters a classroom offer will be available to properly induct people into MOSAIC. The content of the training offer has also been revised to look at 'bite size' training options for specific subjects that create issues.	30 June 2022	76 or more	Green	Amber
67	242 21/22	DACHS	Adult Provider Payments	The reliability of access to and accuracy of information on Mosaic needs to be improved. Access to service users' records and relevant reports should be as and when needed to those who require it, and importantly the information provided should be both accurate and up to date. The service should be developing reports to provide an overview of key information in relation to data quality.	21/22	13/01/2022	Sunny Mehmi Assistant Director of Operations Social Care Systems Manager	Mosaic access is largely permissions based according to the job role that the user has. This has been reviewed to ensure it is fit for purpose. We will be undertaking case audits as part of our quality improvements and in addition Data Quality be one of the priority areas of the Performance Board.	30 June 2022	76 or more	Green	Amber
68	243 21/22	DACHS	Late Payment of Voluntary Sector Grants	There needs to be a clear communication pathway to prevent enquiries about non-payment of invoices being escalated in the first instance to Director level without the teams involved being aware of it. It is suggested that all enquiries should in the first instance be dealt with through Adult Social Care Commissioning. To ensure that issues are identified it is suggested that the AP team ensure that any issues with invoices being rejected are notified to the Commissioning Team when they occur. This process needs to be documented.	21/22	17/01/2022	Melissa Wise Deputy Director of Social Care Darren Carter Director of Finance Lara Fromings Head of Commissioning	An interim process has been established however this requires a further meeting to finalise and agree roles and responsibilities of each team.	01 July 2022	51 to 75	Amber	Amber
69	244 21/22	DACHS	Late Payment of Voluntary Sector Grants	There needs to be prompt communication between the AP and Adult Commissioning Teams to ensure that anything that impacts the ability to effect prompt payment is highlighted and communicated to organisations awaiting payment. This process should be documented and clearly understood by both teams.	21/22	17/01/2022	Melissa Wise Deputy Director of Social Care Darren Carter Director of Finance	There a monthly meeting (referenced in a previous update) that includes all relevant teams which discusses a) specific provider issues, b) team pressures, c) areas to escalate, d) comms to providers. This will be documented as part of the action above.	01 July 2022	76 or more	Green	Green
70	245 21/22	DEGNS	Climate Change Strategy	It would be useful if the Corporate (Carbon) Plan listed the Council's delivery actions is detailed in the strategy. We advise the plan: - a) Be laid out and references in the same format as the Strategy. b) Confirms the directorates and services responsible and provides brief details of their actions from their service plans to achieve this. c) Reaffirms details of the delivery contribution i.e. emission reduction, adaptation, or both.	21/22	17/02/2022	Ben Burfoot Sustainability Manager Kirstin Coley Energy Management Officer	Discussed and agreed at Climate Programme Board on 8 March 2022 - first draft complete with some gaps remaining - should be complete within Q2 2022/23.	04 July 2022	51 to 75	Amber	Red
71	246 21/22	DEGNS	Climate Change Strategy	A Corporate Adaptation Plan is required, which we understand will require an organisational-wide exercise, and that services will need to identify potential impacts on communities, services and service users, and appropriate adaptive responses, with help and advice from appropriate internal and external experts. This should confirm whether these actions relate to corporate infrastructure for delivering services and those for managing the consequences i.e. this might include business continuity, resilience etc.	21/22	17/02/2022	Peter Moore Head of Climate Strategy	Discussed and agreed at Climate Programme Board 8 March 2022, using approach set out in Local Partnerships adaptation toolkit for local authorities. Presentation to Team Talk initiated the process in Substantial piece of work - target completion date Q3-4 2022.	01 July 2022	25 or less	Red	Red
72	247 21/22	DEGNS	Climate Change Strategy	A separate provision, or sub-category could be created on the Strategic Risk Register for monitoring adaptation to climate change.	21/22	17/02/2022	Peter Moore Head of Climate Strategy	Discussed at Climate Programme Board on 8 March 2022 - will be addressed in forthcoming iteration of Strategic Risk Register.	01 July 2022	26 to 50	Amber	Red

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73	248 21/22	DEGNS	Climate Change Strategy	To develop a more systematic approach to delivering the Council's climate change commitments: (i)The ownership of individual RBC actions within the Climate Strategy should be clarified at service/officer level (ii)RBC commitments within the Climate Strategy should be reflected within Service Plans at both the strategic level and in terms of specific actions (iii)In addition to integrating relevant Climate Strategy commitments, in the process of refreshing Service Plans annually, services should be identifying, with the support of the Climate Change & Sustainability Team, additional actions which may be required to contribute to the Council's corporate emissions reduction and adaptation strategies, and giving these an appropriate level of priority (iv)Services may need additional training to become more 'climate literate' and a training package should be developed to support this (v)Adapt the Service Plans to ensure there is a golden thread to demonstrating how services will discharge their climate change responsibilities.	21/22	17/02/2022	Peter Moore Head of Climate Strategy Relevant ADs All ADs/supported by Peter Moore All ADs/supported by Peter Moore/Ben Burfoot Peter Moore All ADs/supported by Peter Moore	Discussed and agreed at Climate Programme Board on 8 March 2022. Point (i) underway (target completion date Q2 2022/23); points (ii, iii, v) PM circulated a guidance note for ADs on embedding climate action in Service Plans in Feb 2022 which signposted to Climate Emergency Strategy actions and PM/BB have attended Service Plan meetings with each Service to initiative discussion, but fully embedding climate action will be an iterative process over this and the next Service Plan cycle; point (iv) training package in preparation - discussed potential integration in core training programme with HR&OD team 28/03/2022 (target completion date Q3 2022). Climate change now integrated in corporate staff induction as a first step.	01 July 2022	26 to 50	Amber	Red
74	249 21/22	BFFC and RBC joint audit	Intercompany accounting	The Director of Finance (RBC) should ensure the agreed Governance documents (policies) are enhanced to include, but not be limited to: •Outlining the high-level expectations of intercompany accounting •Treatment of VAT •Debtors •Creditors Payment for services provided outside of those in the contract •Apportionment Best practice requires a common standard across all entities.	21/22	14/03/2022	Stuart Donnelly Financial Planning & Strategy Manager RBC Steve Davies Strategic Finance Business Partner BFFC	The inter-company guidance /policy set up by RBC will be developed to incorporate: •Outlining the high-level expectations of intercompany accounting •Treatment of VAT •Debtors •Creditors •Apportionment •Payment for services provided outside of those in the contract This will ensure best practice and a common understanding is clearly understood across RBC and BFFC. Once completed to be formally signed off by the Director of Finance (RBC) and the Director of Finance, BFFC.	04 July 2022	25 or less	Red	Red
75	250 21/22	BFFC and RBC joint audit	Intercompany accounting	The Director of Finance (RBC) and Executive Director of Finance and Resources (BFFC) need to provide a briefing on the Service Contract, to raise awareness and guidance to those Business Partners and accounting staff with inter-company accounting responsibilities, on what is required of them to comply with the conditions of the contract. Allocation of responsibilities should be highlighted across both entities. Furthermore, there should be some consideration in providing this briefing as a joint briefing across both entities to promote a collaborative, supportive, and professional working relationship with a single aim.	21/22	14/03/2022	Darren Carter Director of Finance, RBC & Interim Director of Finance, BFFC	Following recent senior manager appointment in BFFC, these processes will be refreshed over Q1 22/23 in line with the Finance Improvement Programme	04 July 2022	25 or less	Red	Red
76	251 21/22	BFFC and RBC joint audit	Intercompany accounting	The (RBC) Director of Finance in collaboration with (BFFC) Executive Director of Finance and Resources should develop agreed and documented systems, procedures, and processes to further improve and manage intercompany accounting and transactions. They should include, but not be limited to: •Being able to easily identify transactions across a common chart of accounts •To match transactions, from both sides •Identify (tag) those for elimination from financial reporting to prevent double accounting •Automate processes where possible •The use of recurring invoices/instalment payments for contract / SLA payments •Billing cut off period •Electronic approval process (Office 365) •Centralised repository (SharePoint) for intercompany financial purposes accessible by both entities and managed by permission rules •Grant funding monitoring (at both entities) •Regular reconciliations of expected income streams •Appropriate lines of communication with documented terms of reference and purpose These procedures and processes should be standardised, and where there is a business need for difference, there should be compatibility.	21/22	14/03/2022	Stuart Donnelly Financial Planning & Strategy Manager RBC Steve Davies Strategic Finance Business Partner BFFC	The (RBC) Director of Finance in collaboration with (BFFC) Executive Director of Finance and Resources will develop agreed and documented systems, procedures and processes. During the Advance systems implementation the following will be implemented: •Being able to easily identify transactions across a common chart of accounts •To match transactions, from both sides •Identify (tag) those for elimination from financial reporting to prevent double accounting •Automate processes where possible •The use of recurring invoices/instalment payments for contract / SLA payments •Billing cut off period •Electronic approval process (Office 365) •Centralised repository (SharePoint) for intercompany financial purposes accessible by both entities and managed by permission rules •Grant funding monitoring (at both entities) •Regular reconciliations of expected income streams •Appropriate lines of communication with documented terms of reference and purpose	04 July 2022	25 or less	Red	Red

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77	252 21/22	BFFC and RBC joint audit	Intercompany accounting	The finance structure for intercompany accounting and day to day activities should be considered, documented, authorised and agreed and shared, and aligned with strategy and policies, that also promote professional and cooperative ways of working. Roles and responsibilities need to be agreed, documented, and imparted to all relevant personnel. Some consideration should also be given to: •The adoption of a single finance team for intercompany accounting actions supported by entity specific finance teams for the day to day financial tasks.	21/22	14/03/2022	Stuart Donnelly Financial Strategy and Planning Manager RBC Steve Davies Strategic Finance Business Partner BFFC	Currently there are named officers from RBC and BFFC who have clarity on their roles and responsibilities with appropriate permissions and electronic authorisation. The policy / guidance and the Advance systems implementation will further clarify the roles and responsibilities. The adoption of a single finance team for intercompany accounting actions supported by entity specific finance teams for the day to day financial tasks is not appropriate within the current arrangements.	04 July 2022	25 or less	Red	Red
78	253 21/22	BFFC and RBC joint audit	Intercompany accounting	The Director of Finance (RBC) and the Executive Director of Finance and Resources (BFFC) should remind staff to comply with timescales detailed in the agreed procedures and ensure there are controls in place that will highlight if / when there is non-conformance. Consideration should be given to including intercompany- tasks and responsibilities within the annual performance review goals / targets for relevant staff.	21/22	14/03/2022	Stuart Donnelly Financial Strategy and Planning Manager RBC Steve Davies Strategic Finance Business Partner BFFC	This will be re-iterated during the communication to staff and reinforced in the guidance / policy guidance.	04 July 2022	25 or less	Red	Red
79	254 21/22	BFFC and RBC joint audit	Intercompany accounting	The Director of Finance (RBC) and the Executive Director of Finance and Resources (BFFC) need to establish co-ordinated monthly reconciliations, which should be compared for accuracy. Any anomalies should be investigated, agreed and adjustments made in a timely fashion. Responsibility for completing reconciliations should be allocated to an appropriate individual and include authorisation for any necessary adjustments.	21/22	14/03/2022	Stuart Donnelly Financial Planning & Strategy Manager RBC Steve Davies Strategic Finance Business Partner BFFC	Initially it is proposed to do quarterly reconciliations and to be reviewed at a later date.	04 July 2022	25 or less	Red	Red
80	255 22/23	DoR	Accounts Receivable	There needs to be a relaunch of the existing debt policy to ensure clear strategic management around debt creation and recovery across the council. This would include clear reporting lines at senior management level across all levels of the council to enable greater awareness across all areas of the importance of debt avoidance where possible and prompt greater effort on debt recovery.	22/23	30/05/2022	Sam Wills Revenues & Benefits Manager	This is occurring organically in some areas as a result of the focussed activity of debt collection, i.e. ASC & DEGNs. It does however require a relaunch to bring all directorates on board and understand their role in the corporate process to reduce debt occurring. Consideration will be given to aligning communication of the Corporate Debt Policy with the implementation and training of the new Finance system.	23 June 2022	25 or less	Red	
81	256 22/23	DoR	Accounts Receivable	There needs to be clear and accountable processes and procedures for debt management that are linked to a council wide debt recovery strategy.	22/23	30/05/2022	Sam Wills Revenues & Benefits Manager	Process mapping sessions have commenced with Revs & Bens Manager, AR Team Leader and AR Officers. These sessions will embed the corporate debt recovery policy and in addition document the processes and reporting we expect to be undertaken by an AR Officer. Process maps will be held electronically with hyperlinks to the relevant process and templates.	23 June 2022	25 or less	Red	
82	257 22/23	DoR	Accounts Receivable	Further work is required to reduce the overall historic debt levels, particularly in adult social care. There needs to be a write off of existing historical debt where recovery is deemed unlikely before any data is transferred across to a new debtors system.	22/23	30/05/2022	Sam Wills Revenues & Benefits Manager	Fortnightly meetings in respect of ASC write offs are currently held and have been in place for several months. The group focus on identifying uncollectable sums and actively progress them through the write off process. Sums below £20,000 are agreed in the meeting and subsequently approved by Darren Carter (s.151). High value write offs are now scheduled for Policy Committee approval and will be a standing quarterly agenda item. Revs & Bens Manager also attends meetings with other directorates to progress and agree write offs in those areas. A data cleansing exercise is also in progress ahead of the migration to a new system	23 June 2022	25 or less	Red	
83	258 22/23	DoR	Accounts Receivable	To back up the debt strategy there needs to be a comprehensive easy to access set of management reports that are capable of reflecting the determined debt strategy at all levels of the debt process (ie cost centre manager to AD level as well as the Debtors team)	22/23	30/05/2022	Sam Wills Revenues & Benefits Manager Advanced System Team	We are currently limited on the reporting available through Fusion. We have to consider time spent developing further reporting in a system that is to be replaced in the near future. An extensive list of KPIs have been provided to the Advanced project manager to ensure this capability is built into the new system.	23 June 2022	25 or less	Red	
84	259 22/23	DoR	Treasury Management	The Capital & Treasury Lead has identified that discussion have been had with the Council's external Treasury Management consultancy service to make available training for the members of the Audit & Governance Committee, although this will not be mandatory. The Treasury Management team should consider undertaking a training needs analysis of the members of the Audit & Governance Committee to ensure that they have the appropriate knowledge and skills to provide a scrutiny function and then maintain a schedule of training and qualifications as recommended by the CIPFA Treasury Management Code of Practice and Cross-Sectoral Guidance Notes 2017. Training should be available on an ongoing basis.	22/23	08/06/2022	Darren Carter, Director of Finance	Treasury Management training was delivered to members of Audit & Governance committee on 28 June 2022	01 July 2022	Complete	Green	

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85	260 22/23	DoR	Reconciliations	The control matrix of reconciliations devised by the Chief Accountant should be reviewed and assessed to ensure it remains fit for current purpose, and then completed. Responsibility for this could then be allocated and then overseen by an appropriate officer or group, such as the Financial Transformation Board (or equivalent). It should then regularly be updated as a key record.	22/23	31/05/2022	Mark Sanders, Chief Accountant	Completed. Dashboard established based on matrix of reconciliations and reported to board.	29 June 2022	Complete	Green	
86	261 22/23	DoR	Reconciliations	Assuming it remains the objective, a timetable should be devised and agreed to support the intention for the Reconciliation Officer to understand, improve (where necessary) and take over feeder system reconciliations. Similarly, it is suggested that this monitored by the Finance Transformation Board (or equivalent).	22/23	31/05/2022	Mark Sanders, Chief Accountant	Target Date 30/09/22 In Progress. The newly appointed Reconciliations Officer will support the review of objectives and timetable for completion analysis work and will provide advice and authorisation where this does not conflict with her primary responsibility of bank reconciliation. It is likely that feeder system reconciliations will need to be completed by non-accountancy teams to maintain appropriate segregation of duties.	29 June 2022	26 to 50	Amber	
87	262 22/23	DoR	Reconciliations	The agreed procedures for completion of the main bank account reconciliation need to be documented and approved. It is also suggested these are regularly updated, as necessary but also formally reviewed and agreed on a fixed (annual) period basis thereafter.	22/23	31/05/2022	Mark Sanders, Chief Accountant	Completed. Bank reconciliation procedures are documented and approved.	29 June 2022	Complete	Green	
88	263 22/23	DoR	Reconciliations	Following completion of those actions detailed in recommendation 3 above in respect of the main bank rec, this process should be repeated for the feeder systems and responsibility for this task clearly assigned. These procedures should reflect agreed processes, roles and responsibilities etc and be as sufficiently detailed as is assessed as necessary. These agreed and completed documented procedures should then be agreed by the relevant service manager and also by Finance and then circulated to all relevant staff and stored in an appropriate site and be used for reference and training purposes, as appropriate.	22/23	31/03/2022	Mark Sanders, Chief Accountant	Planned work for Q2 22/23. A standard template will be confirmed and recommended for use on feeder reconciliations. This will be completed over the next three months following appointment of Reconciliations Officer.	29 June 2022	26 to 50	Amber	
89	264 22/23	DoR	Reconciliations	Any revised guidance as laid down in the procure notes for the main bank reconciliation (or other feeder reconciliations) should address what (other) system access rights the officer(s) involved should have, to ensure there is proper separation of duties in place, that ensures and promotes good separation of duties.	22/23	31/03/2022	Mark Sanders, Chief Accountant	Planned work for Q4 22/23	29 June 2022	25 or less	Red	
90	265 22/23	DoR	Reconciliations	To promote increased resilience and mitigation of risks associated with being potential over-reliant on specific posts carrying out financial reconciliations, it is recommended that to manage risks and to protect the organisation and individual officer(s) alike, that agreed systems ensure and allow for a shared understanding of procedures by than more than a single person.	22/23	31/12/2022	Mark Sanders, Chief Accountant	Planned work for Q4 22/23	29 June 2022	25 or less	Red	
91	266 22/23	DoR	Reconciliations	Where the Reconciliations Officer and / or Bank Rec Team detect regular and continued problems with specific information being reported as part of any reconciliation process (for example incorrect posting information) then these should be referred back to the team / officer concerned for correction, but in the event of repeated and persistent instances, then this should be referred to the Chief Accountant for their attention.	22/23	31/05/2022	Mark Sanders, Chief Accountant	Planned work for Q3 22/23. A review will be undertaken across all central accountancy reconciliation processes and resources to better align responsibilities and aim to reduce simple points of reliance	29 June 2022	25 or less	Red	
92	267 22/23	DACHS	Client Contributions	Actions that ASC staff need to take in relation to the financial assessment process: 1)Relevant ASC staff need to be reminded of their role within/related to the financial assessment process. 2)Care packages need to be put onto Mosaic in a timely manner to allow client contributions to be recognised and then invoiced to the service user. 3)Direct payments need to be reviewed to ensure appropriate payment arrangements are in place. 4)Mosaic records need to detail the appropriate financial representative for the service user, where appropriate, as well as other key information to enable financial assessments to be completed and in a timely manner. There should also be appropriate authority in place for these representatives which should be documented/evidenced. 5)APTs need to be closed down and in a timely manner to enable amendments to be made to service lines, as appropriate. 6)A financial assessment referral needs to be raised and in a timely manner to ensure all service users are assessed for their ability to contribute to their care costs (where applicable).	22/23	17/06/2022	Michelle Tenreiro-Perez Transformation Project Manager Cliff Clynh, Senior Personal Budget Support Officer	Update on each action as follows: 1)Complete - this is already in place. Workshops were held with all staff involved in the financial assessment process between October 2021 and March 2022 establishing expectations of roles and responsibilities within the financial assessment process. 2) In progress - Collaborative work with ASC, the Finance Assessments and Benefits Team and Personal Budgets Support Team has commenced and a concluding meeting to clarify expectations of roles, processes and timescales to be undertaken by all parties is scheduled. Identified training will be provided. 3) In progress - Officers will review Direct Payments clients where they are invoiced for their contributions to be reviewed & either changed or rationale given. 4) In progress - scoping already undertaken. Mosaic records will need to be set up for financial representatives to record their status and so a standardised letter can be sent out. Appointeeships in the Deputy's Team are being explored. 5) & 6) In progress - Both the closure of APTs and timely referrals for a financial assessment a re included in the work between ASC, FAB and PBST which his due to conclude at the end of June setting out expectations of roles and timely processes. A guide to making referrals to the Financial Assessments and Benefits team has been created and will be added to relevant staff desktops. ICT work to support agreed processes will be completed.	29/06/2022	51 to 75	Amber	

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93	268 22/23	DACHS	Client Contributions	Signed legal agreements to support all 3rd party top ups in place, should be on Mosaic and the Mosaic workstep updated to reflect current practice. The identified discrepancy in one case in relation to top up amount needs to be resolved (see 4.2.15 below). Invoicing for 3rd party top ups needs to be to the correct person and there needs to be appropriate debt controls in place to ensure that top ups are actually (being) paid, and in a timely manner.	22/23	17/06/2022	Steve Saunders Principal Personal Budget Support Officer Tracy Maskell, Senior Entitlement & Assessment Officer	In progress - part complete. Cases involving one person are completed in Mosaic, complex cases with multiple people are completed on a word template as the current Mosaic template is insufficient for these. Officers to ensure the Mosaic template to be amended to resolve this issue. Complete - this is already in place. The case with a discrepancy has been reviewed and the need to follow agreed process has been reiterated to the teams involved. In progress - Work is underway with the Mosaic & Oracle Fusion teams to separate 3rd party top ups to ensure invoices are sent to the correct person. Use of separate codes will create greater visibility for improved debt controls.	29/06/2022	51 to 75	Amber		
94	269 22/23	DACHS	Client Contributions	It needs to be ensured that invoices have sufficient detail on them to allow service users/their representatives to identify which service they relate to and for what period. FAB Team (and PBST) need to be involved and input into the wider process of implementing the interface between Mosaic and new financial system.	22/23	17/06/2022	Tracy Maskell, Senior Entitlement & Assessment Officer Steve Saunders, Principal Personal Budgets Officer	Officers to implement separate budget codes for Interim funding, Deferred Payments & 3rd party top ups will be utilised to define the detail on invoices. Complete - this is already in place. Bi-weekly project management meetings being attended. Work ongoing with the project team to substantiate which requirements are, & which aren't going to be available for go live.	29/06/2022	76 or more	Green		
95	270 22/23	DACHS	Client Contributions	Charging uplifts need to be checked in a timely manner and any issues addressed. Also rate uplifts should be implemented automatically where possible rather than manually to reduce the possibility of errors.	22/23	17/06/2022	Tracy Maskell, Senior Entitlement & Assessment Officer	Officers to review the uplift process to be completed with the Mosaic Support Team & subsequent actions implemented. Review meetings have now been arranged. Officers to analyse the advantages and disadvantages of automated rate uplifts and take appropriate action.	29/06/2022	51 to 75	Amber		
96	271 22/23	DACHS	Client Contributions	There should be regular review of progress of financial assessments and associated processes to ensure all service users are being assessed for their ability to contribute to their care costs and in a timely manner. Relevant reports should be available to assist with this process for example in relation to referrals and financial assessments.	22/23	17/06/2022	Steve Saunders Principal Personal Budget Support Officer	Complete - this is already in place. Unallocated work is reported on weekly. Report A10001 - 'FAB Assessments between dates' in place showing all financial assessment activity including time between incoming and completed. This report is now analysed weekly.	29/06/2022	Complete	Green		
										25 or less		16	16.7%
										26-50		11	11.5%
										51-75		30	31.3%
										76+		21	21.9%
										Complete		18	18.8%
										Total		96	