Action Description	Management Update	Internal Audit follow-up status	Internal Audit follow-up outcome	Action Status		
Department: Adults' Social Care, Health and Public I	Protection					
Service Area: Homecare Audit: ASC1706 Procurement of interim homecare service						
Competitive tendering: Staff should discuss contract requirements with the Market Management Team (in ASCH&PP Dept) and with Corporate Procurement (Resources Dept) to find a solution for each service area. A waiver from tendering requirements should be applied for as a last resort.	A re-procurement exercise is currently in progress for a 'Hospital Discharge Service South' which is a remodelled interim homecare service and (as at 20/3/17) is in the evaluation stage. The preferred provider will be announced w/c 20/3/17 and it is planned to award contract by 1 st April – there will be an implementation/transition phase between April to start of the new service on 1 st July 2017. The new contract will be under a Framework agreement for initially 2 years.	Testing scheduled for Q4, 2017/18		Confirmed by management (AMBER)		
Parterning approach between Corporate Procurement and departments, and monitoring arrangements: Establishment of the Contracts and Payments Overview Group to improve communications between the department and Corporate Procurement and to keep procurement activity under review.	The Contracts and Payments Overview Group is meeting regularly to ensure appropriate procurement of contracts.	Testing scheduled for Q4, 2017/18		Confirmed by management (AMBER)		

Action Description	Management Update	Internal Audit follow-up status	Internal Audit follow-up outcome	Action Status
Department: Children, Families and Cultural Service Service Area: Access to Resources Audit: CFCS1612 External Placements	S			
Compliance with Council tendering regulations through use of the following hierarchy of options: 1 internal provision; 2 use of existing framework contracts; 3 issue contracts for specialist placements and invite the providers to join the existing frameworks	A pro forma is now in place to allow requests for spot contracting to be captured, considered and approved. Meetings have been held between officers in Procurement and Social Care Placements to discuss the pro forma and all were in agreement of how it should be used. All are aware that the compliant routes for securing placements/education should be followed before asking for a spot contract arrangement. Legal Services have drafted a standard form spot contract and this will now be applied for social care placements. There has also been a Financial Regulations waiver signed off to cover this process, with Procurement reporting back at the end of the financial year on how many of these contracts have been put in place.	Complete	Further follow-up testing will be scheduled for Q4 in 2017/18	Confirmed by management (AMBER)
Service Area: Youth, Families & Social Work Audit: CFCS1705 Troubled Families				
Monitoring the number of families on the programme to safeguard external funding: Comparisons against trajectory numbers of families worked with on the Programme will be included in quarterly reports going forward. These will be considered by a newly formed bi-monthly Project Board from December 2016. We will continue regular dialogue with the Department for Communities & Local Government on local and national progress and future funding models.	Target numbers and comparisons with trajectory now go to the Board and Operational Group. Future targets will be directly provided by DCLG. Internal dialogue about future funding models is ongoing.	Complete	Progress reports on the number of families being worked with have been presented to a Troubled Families Project Board and a Troubled Families Operational Group. These do show how the number of families is progressing (the numbers engaged with, and claimed for). Initial reports did not show how the number of families on the programme compared to target, but a report that does show progress against target has been prepared for the September 2017 Operational Group. Difficulties in meeting targets is a national issue and Nottinghamshire's performance is comparable to other authorities (as shown in a national progress report published by the DCLG in April 2017). The department is keeping itself aware of national developments including potential changes to the programme to be made by DCLG.	management and internal audit. However progress is below target, which reflects the national position (AMBER)

Action Description	Management Update	Internal Audit follow-up status	Internal Audit follow-up outcome	Action Status	
Target outcomes are consistent with the plan agreed with DCLG: Routine auditing to ensure that targets meet the Nottinghamshire Families Outcomes Plan definitions before any claim can be made. Introduction of a new technical plan, separate to the plan for the family, which we expect will make it easier for practitioners to produce a compliant plan. Non-compliance will continue to be discussed in supervision by the managers who are responsible for signing off the plan. Consider the need for specialist Family Action Plan authors as we use for social care cases.	The technical plan has been piloted and is due to go live on the Fraemwork -I system imminently. Delays have been due to the change freeze associated with the move to the MOSAIC system. Specialist Family Action Plan authors have been considered and rejected but oversight and development of case holders continues.	Complete	A revised Families Outcomes Plan with Technical Guidance has been produced. This is sufficient to contribute to all family action plans having targets that are consistent with the Families Outcomes Plan. To obtain assurance on the quality of family action plans we have relied on the result of 'spot checks' that were carried out by the national Department for Communities & Local Government (DCLG) in July 2017. The DCLG reported that all claims in its sample were valid and that it was confident that the Council is working within the terms of the programme's Financial Framework.	Confirmed by Internal Audit (GREEN)	
Service Area: Special Educational Needs					
Audit: 2015-04 SEND Budget Management Budget holder: Responsibility for the budget for SEND transport to be transferred to Transport & Travel Services	The responsibility for the management of the budget for SEND Transport has been transferred to Transport & Travel Services at the start of the 2017/2018 financial year	Testing scheduled for Q3, 2017/18		Confirmed by management (AMBER)	
Budget setting: a) Budget to be based on relevant aspects that influence expenditure; (b) Development of a model for budgeting and forecasting; © Model to be informed by the outcome of SEND Team manager reviews & estimates of future numbers of pupils with Education, Health & Care plans	All the recommendations (a, b and c) have been implemented	Testing scheduled for Q3, 2017/18		Confirmed by management (AMBER)	
Budget savings : Savings identified in previous budget challenges should be re-assessed and amended to reflect realistic savings.	The previous savings targets from 2014 (totalling £1.1m) have been reassessed as undeliverable and removed from the savings targets	Complete	Confirmed following release of the final report that the recommendation has been implemented, in that the 2017/18 budget has been increased by removing the undeliverable savings of £600,000, plus additional budget pressures of £1,872,000.	Confirmed by Internal Audit (GREEN)	

Action Description	Management Update	Internal Audit follow-up status	Internal Audit follow-up outcome	Action Status
Department: Place				
Service Area: Catering & Facilities Management Audit: E&R1617 Catering (County Hall & Trent Bridge House)				_
Confirmation of goods received prior to paying invoices to suppliers: Reintroduce checks of consolidated invoices on the basis of a 10% ratio	Checks are made on consolidated invoices. These are then signed off and recorded. No discrepancies have been found. The checks are from Seprtember 16 onwards.	Complete, but retesting to be scheduled for Q3 of 2017/18	Sample checking of consolidated invoices to supporting records for deliveries to the Council properties on the West Bridgford campus are in place. Work remains in progress to re-introduce these checks in respect of deliveries to schools.	Implementation remains in progress (RED)
Department: Resources				
Service Area: Business Services Centre				
Audit: 2016-39E&R1617 Competency Centre - BMS Authorisation	s & Security			
SAP maintenance access: run system log monthly, review against change activity and document in the monthly Customer Service Report	Evidence provided to confirm the action has been implemented	Complete	Evidence confirmed that the action is now in place	Confirmed by Internal Audit (GREEN)

Action Description	Management Update	Internal Audit follow-up status	Internal Audit follow-up outcome	Action Status
Department: Cross-Cutting Service Area: Agency Staff & Consultants Audit: XC1602				
Re-authorising extensions to short-term placements: Identify short-term placements that have extended into longer-term placements to ensure a vacancy Control Document Record is completed. Automation of management information: Explore with the managed service provider the possibility of the online system differentiating between longer term placements requiring a VCDR and the more urgent short-term requirements. A manual process will be implemented if the adjustment cost is prohibitive.	quarterly basis as part of the data collection	Complete	Audit testing confirmed that quarterly reviews of all agency placements by HR business partners (whilst collating information for Personnel Committee report) is in place. Awaiting confirmation regarding completion of VCDR when short term placements get extended. The manual process (as detailed above) for monitoring placements is now in place and on the whole, provides justification for each placement. Testing confirmed that an analysis of agency staff is being reported to Personnel Committee quarterly.	Confirmed by Internal Audit (GREEN)
Automation of management information: Build into future tendering exercises for this service the requirement to differentiate between the nature of agency placements	f		We confirmed that the existing contract has been extended for one year until November 2018 and the new requirements are to be included in the tender documentation.	Pending new contract

		Internal Audit			
Action Description	Management Update	follow-up status	Internal Audit follow-up outcome	Action Status	
On-going review of agency placements: Specific report from the service provider system to identify individual tenure information, to be used as part of the corporate monitoring process. An electronic pro- forma will be introduced to record the detail of the discussions between HR and managers to capture the ongoing reasons for the agency placement and the intended exit date. Where there are concerns about placement drift, these will be escalated to the responsible service director to mirror the approval process for VCDRs. The 12 week period is significant for 2 reasons: it is when Agency Worker Regulations provide additional protections; this is the maximum period allowed for temp staff without VCDR approval. The additional protections will be brought to managers' attention so they are personally made aware and encouraged to consider whether agency is the most cost effective way of filling a temporary or permanent vacancy.	introduction of a cap on all qualified children's social care posts with a minimum reduction of £4 per hour for all new supply. We continue to negotiate tenure discounts for the longer term placements from 6 months onwards	Testing of the monthly report & challenge process	We confirmed that Human Resources now receive monthly management information reports from the managed service provider which includes tenure information and other detailed analysis. The reports also show any placements which have been extended and reasons for the extension. Also, the information collated for the Personnel Committee provides justification for all placements. For Children's Services, we confirmed that the Service Director chairs regular challenge panels where the need for ongoing placements are discussed, including the exit strategy. The panel includes the Group Manager HR and a finance colleague. Minutes of meetings are not available, however we confirmed that an email had been sent following a recent panel meeting outlining the agreed placements.	Confirmed by Internal Audit (GREEN)	
Compliance with regulations for engaging consultants: Corporate Directors will be reminded of the processes surrounding the engagement of consultants as set out in financial regulations.	Financial Regulations have been updated and will be published on the intranet during February 2017. Corporate Directors and their leadership teams have been reminded by their respective Senior Finance Business Partners of the processes surrounding the engagement of consultants	scheduled for Q2	Confirmed - Financial Regulation (section 3.3) has been updated and guidance on the use of consultants has been provided. Both were posted on the intranet. Both documents specify that the engagement of consultants requires the approval of the committee or Corporate Directors and a standard 'Request to procure a Consultant Form' has been included in the guidance.	Confirmed by Internal Audit (GREEN)	
Service Area: Information Governance Audit: XC1701					
Corporate awareness of the security of information - Completeness of the Information Asset Register (IAR): The IAR has been compiled by the Information Asset Managers and is under review. The Information Manager will write to all Information Asset Owners to confirm that they have checked the entries in their areas and are satisfied that the register is substantially complete.		Testing to be rescheduled		Implementation remains in progress (RED)	

		Internal Audit		Action	
Action Description	Management Update	follow-up	Internal Audit follow-up outcome	Status	
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Corporate awareness of the security of information - assessment of business impact levels and security classifications: The Information Manager is reviewing all aspects of the IAR, including Business Impact Levels and security classifications Corporate awareness of the security of information - Risk assessments for high business impact information assets: As part of the review of the IARs the Information Manager will liaise with the relevant Information Asset Managers to review the Bunsiness Impact Level rating and with ICT to ensure all information assets with a Business Impact Level of 4 or higher is subject to a risk assessment (currently 92 assets).	Review has been implemented as planned and a number of revisions have been agreed with Information Asset Owners (IAOs). Work is ongoing with IAOs to identify Information Sharing Agreements in relation to Information Assets (IAs) and to ensure all relevant IAs are included in the Register.	review at the end of September 2017, and pending the establishment of internal overview and operational boards to drive the Council's preparations for the General Data Protection		Implementation remains in progress (RED) Implementation remains in progress (RED)	
Corporate awareness of the security of information - On-going review of risk assessments for high business impact information assets: Owners of information with a BIL of 4 and above will be identified during the review and made aware of the need for an annual review and will be asked to return a checklist signed by the Information Asset Owner each year to confirm this has been done.	f	Regulations from April 2018.		Implementation remains in progress (RED)	
Vetting checks for Public Services Network (PSN) administrators, to ensure continued access to the PSN: The work on confirming that the PSN Domain Administrators have had a vetting check has been completed	No update required - the response to the recommendation confirms implementation	Complete	Confirmation obtained from the Business Services Centre that the appropriate vetting checks have been completed.	Confirmed by Internal Audit (GREEN)	