



Standards and Audit Committee

Tuesday, 19 July 2022 at 7.30 pm

**Council Chamber, Runnymede Civic Centre,
Addlestone**

Members of the Committee

Councillors: M Nuti (Chairman), J Broadhead (Vice-Chairman), A Berardi, D Cotty, L Gillham, J Hulley, J Olorenshaw, S Ringham, S Walsh and S Williams

In accordance with Standing Order 29.1, any Member of the Council may attend the meeting of this Committee, but may speak only with the permission of the Chairman of the Committee, if they are not a member of this Committee.

AGENDA

- 1) Any report on the Agenda involving confidential information (as defined by section 100A(3) of the Local Government Act 1972) must be discussed in private. Any report involving exempt information (as defined by section 100I of the Local Government Act 1972), whether it appears in Part 1 or Part 2 below, may be discussed in private but only if the Committee so resolves.
- 2) The relevant 'background papers' are listed after each report in Part 1. Enquiries about any of the Agenda reports and background papers should be directed in the first instance to **Miss C Pinnock, Democratic Services Section, Law and Governance Business Centre, Runnymede Civic Centre, Station Road, Addlestone (Tel: Direct Line: 01932 425627). (Email: clare.pinnock@runnymede.gov.uk).**
- 3) Agendas and Minutes are available on a subscription basis. For details, please ring Mr B A Fleckney on 01932 425620. Agendas and Minutes for all the Council's Committees may also be viewed on www.runnymede.gov.uk.
- 4) In the unlikely event of an alarm sounding, members of the public should leave the building immediately, either using the staircase leading from the public gallery or following other instructions as appropriate.

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Filming should be limited to the formal meeting area and not extend to those in the public seating area.

The Chairman will make the final decision on all matters of dispute in regard to the use of social media audio-recording, photography and filming in the Committee meeting.

List of matters for consideration

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Part I

Matters in respect of which reports have been made available for public inspection

1. **Notification of Changes to Committee Membership**
2. **Minutes** 4 - 8

To confirm and sign as a correct record the Minutes of the meeting held on 25 May 2022 (Appendix 'A').
3. **Apologies for Absence**
4. **Declarations of Interest**

Members are invited to declare any disclosable pecuniary interests or other registrable and non-registrable interests in items on the agenda.
5. **Summary Internal Controls Assurance (SICA) Report 2022/2023** 9 - 21
6. **Internal Audit Progress Report for Outstanding Recommendations** 22 - 28
7. **Complaints and Compliments Quarter 1 2022/2023** 29 - 35
8. **Exclusion of Press and Public**

Part II

Matters involving exempt or confidential information in respect of which reports have not been made available for public inspection:

Exempt Appendix A to Complaints and Compliments Quarter 1 2022/2023

Runnymede Borough Council

Standards and Audit Committee

Wednesday, 25 May 2022 at 7.30 pm

Members of the Committee present: Councillors M Nuti (Chairman), J Broadhead (Vice-Chairman), A Berardi, D Cotty, L Gillham, J Hulley, J Olorenshaw, S Ringham, S Walsh and S Williams.

1 Minutes

The Minutes of the meeting of the Committee held on 25 January 2022 were signed as a correct record.

In doing so it was confirmed that TIAA's contract with the Council to provide Internal Audit services had been extended for a further 12 months, pending a re-tender of the contract.

2 Declarations of Interest

There were no Declarations of Interests.

3 Summary Internal Controls Audit (SICA) Report 2021/22

The Committee noted progress with the audit programme for 2021/2022 and that the Annual Assurance report would be submitted to the next scheduled meeting of the Committee in July 2022.

Members were pleased that five more audits had been completed in the areas of Key Revenues and Financial Controls. The Corporate Head of Finance and his staff were thanked for their input.

There had been further changes to the audit programme at the request of the relevant Corporate Heads owing to staffing issues. This meant a delay to commencing the audits on Commercial Property, Commercial Rents and HR Absence Management. Officers planned to start these audits in June 2022.

Officers reported that fieldwork was in progress for Communications, Main Accounting (General Ledger), Customer Services and two areas of ICT, Housing and Planning. Draft reports had been issued for Risk Management, Business Continuity, Freedom of Information and Housing Rents.

The Committee's attention was drawn to the 'Root Cause Indicators' which showed a positive direction of travel so far, and to the list of Client Briefing Notes which had been sent to the Senior Leadership Team and were available to Members on request.

There were no priority 1 recommendations to report and the two priority 2 recommendations regarding Financial Controls had been implemented.

At a previous meeting, Members had expressed concern about the outcome of a Safeguarding audit. Officers assured the Committee that the new Corporate Head whose area this came under now was making good progress with implementing the relevant recommendations.

The continued delay with resolving the Depot audit was noted. Members considered that although it had been difficult to make progress owing to Covid that it was time to chase up outstanding areas such as this.

4 **Internal Audit progress report on outstanding recommendations**

The Committee reviewed progress with outstanding recommendations from previous audits, of which there were 11. Another 11 had been implemented but there were still 5 that were subject to discussion with the relevant Corporate Heads.

Further details of outstanding recommendations were given. The Corporate Head of Law and Governance would be asked to confirm that the GDPR recommendations were now complete. This involved checking approximately 33 contracts for compliance. A revised date of 30 June 2022 to implement the Procurement related recommendations was noted.

The Committee was anxious that those relating to the Depot which had been ‘live’ for several years now should be finalised and if necessary the Head of that service would be asked to explain the position at a future meeting. Officers had been advised that progress was now being made and that everything would be picked up in the follow up review planned for 2022/2023.

5 **Annual Governance Statement 2021/22**

The Committee’s approval was sought to recommend the Annual Governance Statement (AGS) for 2021/2022 to the Corporate Management Committee which was meeting the following evening.

Members agreed that the AGS was an important document which demonstrated meeting the statutory requirement to report publicly on the extent to which the Council was complying with its own code of governance which contained seven core principles relating to governance and financial matters and how the Council conducted its affairs.

The process was an active review which included areas for improvement and an action plan as well as setting out planned changes in the coming year.

Officers had streamlined the statement to provide links to other documents, which was appreciated. Officers agreed to make amendments to Principals D and E as discussed to change the frequency of Constitution updates and to add other partnerships.

RESOLVED that –

The draft Annual Governance Statement, as amended, be recommended to Corporate Management Committee for approval

6 **Government response to Committee on Standards in Public Life review of local government ethical standards**

The Committee received for information a report setting out central Government’s response to the Committee on Standards in Public Life’s review of local government ethical standards. The Government had provided its opinion on the 26 Best Practice Recommendations resulting from the review which concerned general governance issues for local authorities.

The Committee recalled there had been four previous reports to this Committee going back to July 2020 when the new Model Code of Conduct produced by the Local Government Association was first adopted, as recommended.

Officers highlighted a number of the recommendations and progress made with their implementation locally. For example, the change to making non-disclosure of Councillors’ addresses the starting point which would require legislative change.

In respect of Recommendation 3, the Committee noted that the Government had stopped short of presuming a Councillor to always be acting in their official capacity on social media. Recent training for Members had emphasised the importance of separating their role as a Councillor from their private life.

Recommendations 8, 9 and 11 concerned the Independent Person who was consulted in the event a complaint was lodged with the Monitoring Officer about a Councillor or co-opted Member. Officers confirmed that consideration would be given to providing legal indemnity to protect the Independent person when they provided advice to the authority.

Officers advised that the Government was reluctant to re-introduce the ability to suspend Councillors if they breach the Code of Conduct despite representations from the sector but was willing to look at sanctions for serious breaches such as bullying and harassment. Officers confirmed that the Government had decided that failure to disclose a pecuniary interest should remain to be a criminal offence.

The last two recommendations concerned how ethical standards were maintained through training and peer reviews. Officers were asked to clarify whether there would be a 'lighter touch' follow up visit following the last peer review in 2019 or the Council would wait until the next Corporate Peer Review which had been recommended to take place in 2024.

7 Complaints and Compliments about Councillors 2020 - 2022

The Committee noted a report on complaints and compliments about councillors covering the municipal years 2020 to 2022 which would in future be an annual report for the first meeting of each municipal year. Producing this report demonstrated compliance with the relevant Best Practice Recommendation issued by the Committee on Standards in Public Life.

A summary of the 12 complaints was noted and how they had been resolved. Officers advised that a number had been closed because the person making the complaint had not when asked provided further or enough information for it to be worthy of investigation.

Members were directed to the guidance on the Council's website if someone wished to make a complaint as well as the existence of a register, which unless otherwise directed was anonymised.

Officers advised that the Council's Constitution set out the full details of how complaints were dealt with noting the important role of this Committee should a complaint result in there being a Hearing.

The Committee was informed that there were no Hearings in the reporting period and there was one accepted breach where an apology was made to the Council. Officers advised that one investigation was carried out by an Independent Solicitor where the complaint was deemed worthy of pursuing and met the criteria for doing so.

The Independent Person was involved in four cases during 2020 – 2022. To improve resilience Officers agreed to explore a partnership arrangement with other local authorities in Surrey to widen the pool of 'Independent Persons' rather than recruit a second Independent Person.

Members were pleased to have received a compliment regarding the Councillors who helped out in the Community during the Pandemic; which had been well documented and appreciated.

8 **Complaints and Compliments Quarter 4 2021/2022**

The Committee noted a review of complaints and compliments about the Council, for Quarter 4 2021/2022 (January to March 2022).

Officers reported 17 entries in the complaints register and 26 compliments, as well as the year end figures of 91 and 98 respectively. The Committee was concerned that one service area had a number of complaints that were outstanding. It was confirmed that the Assistant Chief Executive had, as with outstanding recommendations from audits, been tasked with chasing the relevant Corporate Head(s).

The Committee noted that over the full year 25% of complaints were upheld or partly so. This was placed in the context of a total of 23 complaints upheld out of 91 compared with 98 compliments.

Officers advised that the number of complaints when people were working from home was higher but that this had appeared to settle down. The Committee considered it would be useful to have in future a summary of complaints so as to identify any common themes which they as Members could support Officers with resolving.

The two stage complaints process was explained as well as the role of the Local Government Ombudsman where the internal process had been exhausted.

Members were pleased to learn that after discussion with the Communications team staff receiving compliments would in addition to receiving an emailed letter would also be sent a certificate as a thank you from this Committee. Members stated that recognising where staff had been praised by the public was important, noting the high number of compliments for the Council's Green Space team.

Members asked why the number of compliments has halved in 2021/2022 compared with the previous year. It was thought that compliments recognising the work staff did during the pandemic might explain this.

9 **External Audit Update**

The Committee was provided with an update on progress with finalising the 2019/2020 external audit of the Council's Statement of Accounts.

Members were disappointed that the audit was not signed off yet although the external auditors assured that it was substantially complete. Officers were requested to record the complaint made by Members of RIRG that the 2019/2020 external audit was still not finalised.

Work to date had identified a material misstatement, since corrected, regarding the value of other land and buildings being overstated by £1.6m in the draft accounts and within the Group financial statements, assets held by the Council's wholly owned subsidiary had been reclassified from property, plant and equipment to investment property. One further error, also corrected, had decreased the Council's surplus on the provision of services for the year by £533,000.

Officers advised that the outstanding matters were completion of work relating to the Council as a Going Concern, its 'use of resources', subsequent events work, a review of the final version of financial statements and completion of the external auditor's final quality reviews.

The Committee was advised that Runnymede was not alone in having unaudited accounts. However, it did mean that the Council could not access external funding outside of Local Government until they were completed satisfactorily. The nationwide picture of the audit

sector was not healthy with issues recruiting and retaining specialist auditors in a complex and demanding area of work.

Officers confirmed that options for assisting the audit sector were being considered by the Department for Levelling Up, such as skipping a year's audit to help auditors catch up, and they would update Committee on these at a future meeting.

In terms of progress, it was noted that the 2021/2022 external audit would likely commence in October 2022 but would not be finalised on time.

Officers were asked to consider an option of presenting 'mini audits' to Corporate Management Committee.

10 **Exclusion of Press and Public**

There was no discussion on the Part II Appendix to the report on Complaints and Compliments save to say the positive feedback for individuals and teams was welcomed by the Committee.

Chairman's Closing remarks

Members were asked to note that training on analysing audits and the audit process using an old audit as an exercise would take place at 6.30pm, before the next scheduled meeting on 19 July 2022.

(The meeting ended at 9.00 pm.)

Chairman

Summary Internal Controls Assurance (SICA) Report 2022/2023 (TIAA, Chris Harris)

Synopsis of report:

To inform Members on the progress made to date by TIAA, the Council's internal auditors, on the 2022/2023 Internal Audit Annual Plan.

Recommendation(s):

None. This report is for information.

1. Context of report

- 1.1 Attached at Appendix 'A' is the most recent Summary Internal Controls Assurance (SICA) Report, as at 27 June 2022.

2. Report

- 2.1 The report identifies 2 audits completed since the last meeting of this Committee. These are for Freedom of Information and Housing Rents; both of which received a 'substantial' evaluation. There were 2 priority 3 recommendations for Freedom of Information and 1 for Housing Rents.
- 2.2 Fieldwork is in progress for 8 audits from the 2021/2022 audit programme, and 5 audits in the 2022/2023 programme. Three Draft reports have been issued and a further 12 have been finalised. TIAA's Audit Director will provide a verbal update at the meeting.
- 2.3 Members will be pleased to learn that the deferred audit on HR Absence Management has now started.
- 2.4 One fraud alert has been issued by TIAA which can be circulated to Members of the Committee separately, on request.

3. Resource implications

- 3.1 The audit service is budgeted for in the Council's annual budgets, with a small contingency to cover unforeseen audits.

4. Legal and Equality implications

- 4.1 None.

(For information)

Background papers

Relevant Internal Audit working files and reports



Runnymede Borough Council

Summary Internal Controls Assurance (SICA) Report

2022/23

June 2022

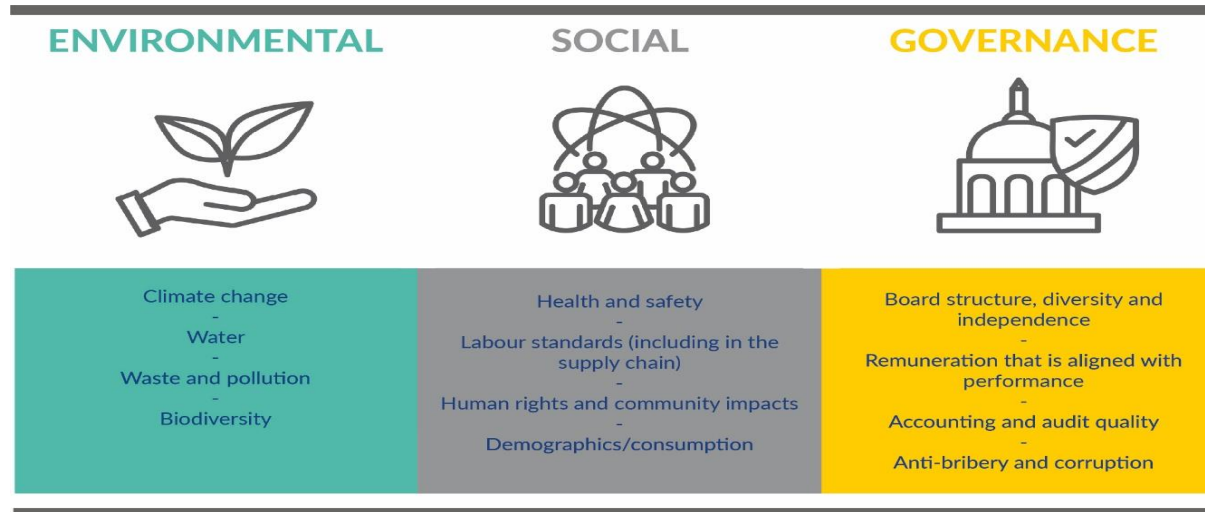
Summary Internal Controls Assurance

Introduction

1. This summary controls assurance report provides the Standards and Audit Committee with an update on the emerging Governance, Risk and Internal Control related issues and the progress of our work at Runnymede Borough Council as at 27th June 2022.

Emerging Governance, Risk and Internal Control Related Issue

2. Sustainability is becoming an ever more important consideration for organisations with the efforts of all sectors to reduce their emissions on a much bigger scale being integral to ensuring that global warming stays within the 1.5°C limit highlighted by the IPCC report and adopted by COP26. The increasing importance of Environmental, Social and Governance (ESG) objectives, as well as the introduction of reporting frameworks, both voluntary and mandatory, highlights the need for organisations to demonstrate greater transparency for their stakeholders. The need for strategic direction and the existence of risks and opportunities within ESG means that the Standards and Audit Committee’s role is integral in setting the ESG agenda.



Audits completed since the last SICA report to the Audit Committee

3. The table below sets out details of audits finalised since the previous meeting of the Audit Committee.

Audits completed since previous SICA report

Review	Evaluation	Key Dates			Number of Recommendations			
		Draft issued	Responses Received	Final issued	1	2	3	OEM
Freedom of Information	Substantial	22.03.22	26.05.22	27.05.22	-	-	2	-
Housing Rents	Substantial	29.03.22	19.05.22	19.05.22	-	-	1	-

4. The Management Action Plans for each of the finalised reviews are included at Appendix A. There are no issues arising from these findings which would require the annual Head of Audit Opinion to be qualified.

Progress against the 2021/22 and 2022/23 Annual Plans

5. Our progress against the Annual Plan for 2021/22 and 2022/23 is set out in Appendix B.

Changes to the Annual Plan 2022/23

6. The following changes have been made to the 2022/23 internal audit plan.

Review	Rationale
HR – Absence Management	This review was cancelled at the end of 2021/22 and is now included into the 2022/23 plan – 6 days

Progress in actioning priority 1 & 2 recommendations

7. We have made no Priority 1 recommendations (i.e. fundamental control issue on which action should be taken immediately) since the previous SICA. The table below summarises the extent to which confirmation has been received that management actions have been taken that the risk exposure identified has been effectively mitigated. More information is provided in Appendix C.

Mitigating risk exposures identified by internal audit reviews

Review	Date	Priority 1			Priority 2		
N/A		0	0	0	0	0	0

Root Cause Indicators

8. The Root Cause Indicators (RCI) have been developed by TIAA to provide a strategic rolling direction of travel governance, risk and control assessment for Runnymede Borough Council. Each recommendation made is analysed to establish the underlying cause of the issue giving rise to the recommendation (RCI). The analysis needs to be considered over a sustained period, rather than on an individual quarter basis. Percentages, rather than actual number of reviews/recommendations made permits more effective identification of the direction of travel. A downward arrow signifies a positive reduction in risk in relation to the specific RCI.

RCI – Direction of Travel Assessment

Root Cause Indicator	Qtr 2 (2021/22)	Qtr 3 (2021/22)	Qtr 4 (2021/22)	Qtr 1 (2022/23)	Medium term Direction of Travel	Audit Observation
Directed						
Governance Framework	71%					
Risk Mitigation						
Control Compliance	29%		100%			
Delivery						
Performance Monitoring						
Sustainability						
Resilience						

Frauds/Irregularities

9. We have not been advised of any frauds or irregularities in the period since the last SICA report was issued.

Other Matters

10. We have issued the following client briefing notes or fraud digests, since the previous SICA report.

Client Briefing Alerts issued by TIAA

Briefing Note
None issued since the last Committee report

Fraud Alert
Misappropriation of Fuel Fraud Alert

Responsibility/Disclaimer

11. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. The matters raised in this report not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.



Executive Summaries and Management Action Plans

The following Executive Summaries and Management Action Plans are included in this Appendix. Full copies of the reports are available to the Audit Committee on request. Where a review has a 'Limited' or 'No' Assurance assessment the full report has been presented to the Audit Committee and therefore is not included in this Appendix.

Review	Evaluation
None to report at this meeting	



Progress against Annual Plan – 2021/22

System	Planned Quarter	Current Status	Comments
Risk Management	Q1	Draft report issued 29.09.21	Postponed from Q1 to Q2 at request of Head of Service.
Commercial Property	Q3	Audit Cancelled	Head of Service has requested for this to be postponed due to staffing issues. Audit to be cancelled from the 2021/22 audit plan and included in the 2022/23 audit plan
Data Quality	Q1	Final report issued 10.03.22	Postponed from Q1 at request of Head of Service.
Commercial Rents	Q3	Audit Cancelled	Head of Service has requested for this to be postponed due to staffing issues. Audit to be cancelled from the 2021/22 audit plan and included in the 2022/23 audit plan
Human Resources – Absence Management	Q2	Audit Cancelled	Head of Service has requested for this to be postponed due to staffing issues. Audit to be cancelled from the 2021/22 audit plan and included in the 2022/23 audit plan
Communications	Q2	Fieldwork in progress	Postponed from Q2 at request of Communications Manager.
Business Continuity	Q2	Draft report issued 10.03.22	Deferred from the 20/21 audit plan.
Key Revenues Controls	Q3		
Benefits and Council Tax Support	As above	Final report issued 26.01.22	
Non-Domestic Rates (NDR)	As above	Final report issued 26.01.22	
Council Tax	As above	Final report issued 26.01.22	
Key Financial Controls	Q3		
Accounts Payable (Creditors)	As above	Final report issued 11.01.22	
Accounts Receivable (Debtors)	As above	Final report issued 11.01.22	
Main Accounting (General Ledger)	Q3/4	Fieldwork in progress	
Payroll	Q3	Final report issued 18.02.2022	


Treasury Management	Q3/4	Final report issued 23.03.22	
Customer Services	Q1	Fieldwork in progress	
ICT – Software Asset Management	Q3	Fieldwork in progress	
ICT – Contract Management	Q3	Fieldwork in progress	
Freedom of Information	Q1	Final report issued 27.05.22	Postponed at the request of the Information Governance Officer.
Depot	Q3	Cancelled	Audit to be cancelled from 2021/22. It was advised by the Depot Manager that there have been no further developments since the previous audit due to unfilled vacancies (nearly 1/3 of the staff) within the office staff at the depot. Due to the limited amount of staff available to run and deliver the daily operations all the staff time has been devoted to ensuring the operations are run and delivered in continually difficult times. The Depot will be subject to a full follow up review as part of the 2022/23 audit plan.
Runnymede Travel Initiative	Q1	Cancelled	Audit cancelled as the Yellow Bus Service is no longer operational.
Planning Enforcement	Q2	Draft report issued 22.06.22	Postponed at the request of the Development Manager due to a change of management personnel.
Housing Rents	Q3/4	Final report issued 19.05.22	
Housing Health and Safety	Q2	Final report issued 21.09.21	
Housing Repair and Maintenance	Q2	Final report issued 08.12.21	
Housing Enforcement	Q2	Fieldwork in progress	Postponed at the request of the Housing Services Manager.
Sheltered Accommodation	Q1	Fieldwork in progress	
Housing Section 106 and CIL	Q1	Fieldwork in progress	Postponed at the request of the previous Development Manager due to a change of management personnel. Following the introduction of CIL the scope has now been expanded to incorporate this area.
Follow up of recommendations	Q1,2,3,4		Progress reports provided to each Standards and Audit Committee.


Progress against Annual Plan – 2022/23

System	Planned Quarter	Current Status	Comments
Commercial Property	1	Fieldwork in progress	
Commercial Rents	1	Fieldwork in progress	
Absence Management	1	Fieldwork in progress	
Housing Allocations and Homelessness	1	Fieldwork in progress	
Leisure Contract	1		
Community Grants	1		
Governance – Gifts and Hospitality	1		
Data Protection & Information Governance	2		
ICT – Service Desk	2		
ICT – Virtual / Cloud based approach to DR	2		
Housing Health and Safety	2	Fieldwork in progress	
Recruitment	2		
Depot (including Trade Waste)	2		
Car Parking	2		
Payroll	3		
Budgetary Control	3		
Key Revenues Controls: -Housing Benefits and Council Tax Support -Business Rates -Council Tax	3		

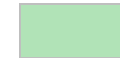
Key Financial Controls: -Accounts Payable (Creditors) -Accounts Receivable (Debtors)	3		
Procurement/Contracts	4		
Climate Change	4		
Income – Cash & Bank	4		
Main Accounting (General Ledger)	4		
Capital Accounting and Asset Management	4		
Housing Rents	4		
Follow Up	1 - 4		

KEY:

 To be commenced

 Site work commenced

 Draft report issued

 Final report issued



Priority 1 and 2 Recommendations - Progress update

Recommendation	Priority	Management Comments	Implementation Timetable	Responsible Officer	Action taken to date (and any extant risk exposure)	Risk Mitigated
No audits to report						
	2					

KEY:

Priority Gradings (1 & 2)

1	URGENT	Fundamental control issue on which action should be taken immediately.	2	IMPORTANT	Control issue on which action should be taken at the earliest opportunity.
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Risk Mitigation

CLEARED	Internal audit work confirms action taken addresses the risk exposure.	ON TARGET	Control issue on which action should be taken at the earliest opportunity.	EXPOSED	Target date not met & risk exposure still extant
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Briefings on developments in Governance, Risk and Control

TIAA produces regular briefing notes to summarise new developments in Governance, Risk, Control and Counter Fraud which may have an impact on our clients. These are shared with clients and made available through our Online Client Portal. A summary list of those CBNs and Fraud Alerts issued in the last three months which may be of relevance to Runnymede BC is given below. Copies of any CBNs are available on request from your local TIAA team.

Summary of recent Client Briefing Notes (CBNs)

CBN Ref	Subject	Status	TIAA Comments
June 2022	Misappropriation of Fuel Fraud Alert:		<p>Action Required</p> <p>The risk of opportunistic fraud and/or theft of fuel paid for by the business has dramatically increased in the last few weeks. Reminding all staff that there is zero tolerance of misappropriation of fuel paid for by the business would be a timely deterrent to employees who might otherwise be tempted.</p> <p>Organisations should also seek to obtain assurance over the robustness of their current fuel expenditure controls.</p>

Internal Audit Progress Report for Outstanding Recommendations (TIAA, Chris Harris)

Synopsis of report:

To inform Members on the progress made by Council Officers in implementing the recommendations made by TIAA, the Council's Internal Auditors, resulting from the internal audit work.

Recommendation(s):

None. This report is for information.

1. Context of report

- 1.1 Attached at Appendix 'A' is TIAA's Follow Up Report on Recommendations made following completion of the internal audit work. This exception report summarises outstanding recommendations in accordance with the review carried out earlier this month.

2. Report

- 2.1 At the time of writing this report, 6 of those previously outstanding had been implemented and 5 were outstanding. The Committee will note that 4 of those that remain outstanding concern previous DSO audits. However, the Corporate Head of Environmental Services reports that progress is being made and that the recently approved refurbishment of the Depot will assist. Further details concerning the Depot recommendations and Housing Health and Safety are available in the appendix.

3. Resource Implications

- 3.1 The audit service is budgeted for in the Council's annual budgets, with a small contingency to cover unforeseen audits.

4. Legal and Equality implications

- 4.1 None.

(For information)

Background papers

Relevant Internal Audit working files and reports

Runnymede Borough Council

Internal Audit Progress Report for Outstanding Recommendations

2022-23

July 2022

Executive Summary

Introduction

1. This summary report provides the Standards and Audit Committee with an update on the progress in implementing the priority 1, 2 and 3 recommendations arising in previous internal audit reports.
2. This follow up review was carried out in June 2022. Since the previous follow up review was carried out (May 2022), 6 recommendations have reached their initial or revised target implementation date, and status updates have also been sought for the additional 5 recommendations previously reported as outstanding.

Key Findings & Action Points

3. The follow up review considered whether the management action taken addresses the control issues that gave rise to the recommendations. The implementation of these recommendations can only provide reasonable and not absolute assurance against misstatement or loss. From the work carried out the following evaluations of the progress of the management actions taken to date have been identified.

Evaluation	Number of Recommendations
Implemented	6
Outstanding	5
No Longer Applicable	0
Not Implemented	0

4. For the 6 recommendations that have been confirmed as implemented, no further action is necessary and specific details have not been included in this report
5. For the 5 recommendations classified as Outstanding, these will continue to be periodically monitored, and details relating to the specific recommendations in these cases have been included in the Detailed Findings section below.
6. Four of the outstanding recommendations relate to the previous Depot audit. It was confirmed that the new Head of Service for this area is making progress with implementing the recommendations, including obtaining recent agreement for the refurbishment and upgrade of the Depot prior to grounds maintenance and green spaces services being relocated and delivered in house from the depot premises in April 2023. However, as these recommendations are not yet fully implemented they continue to be included in the Detailed Findings section below. The Depot is subject to a separate, full follow up review during 2022/23 and therefore these recommendations will be considered as part of that review.

Scope and Limitations of the Review

7. The review considers the progress made in implementing the recommendations made in the previous internal audit reports and to establish the extent to which management has taken the necessary actions to address the control issues that gave rise to the internal audit recommendations.
8. The responsibility for a sound system of internal controls rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses that may exist. Neither should internal audit work be relied upon to identify all circumstances of fraud or irregularity, should there be any, although the audit procedures have been designed so that any material irregularity has a reasonable probability of discovery. Even sound systems of internal control may not be proof against collusive fraud.
9. For the purposes of this review reliance was placed on management to provide internal audit with full access to staff and to accounting records and transactions and to ensure the authenticity of these documents.

Release of Report

10. The table below sets out the history of this report.

Date final report issued:	7 th July 2022
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Detailed Findings

Follow Up

11. Management representations were obtained on the action taken to address the recommendations and limited testing has been carried out to confirm these management representations. The following matters were identified in considering the recommendations that have not been fully implemented:
12. Depot

Audit title	Depot	Audit year	2020/21	Priority	1
Recommendation	The Depot create its own risk register to identify the key risks associated with the Depot and how these are being controlled and managed.				
Initial management response	<p>The recommendation raised in the previous report was for a separate risk register for the depot be 'considered'. This was then agreed by the then DSO manager with a target date of 1 July 2018. Follow up of this in Oct 2019 found this remained outstanding and it was subsequently brought to the attention of the new DSO manager in Dec 2019 with a revised date for action being agreed with the CHoES of April 2020. Revised further to April 2021 as a direct impact of Covid and awaiting the outcome of the 'depot feasibility study' commenced in Feb 2020 but also delayed for the same reason.</p> <p>New implementation date set to allow for outcome of on-going H&S risk assessments report.</p>				
Responsible Officer/s	DSO Manager /CHoES	Original implementation date	30/09/21	Revised implementation date	TBC
Latest Update	<p>It was advised by the Depot Manager that there have been no further developments since the previous audit due to unfilled vacancies (nearly 1/3 of the staff) within the office staff at the depot. Due to the limited amount of staff available to run and deliver the daily operations all the staff time has been devoted to ensuring the operations are run and delivered in continually difficult times.</p> <p>The Depot is subject to a separate, full follow up review during 2022/23 and therefore this recommendation will be considered as part of that review.</p>				
Status	Outstanding				

Audit title	Depot	Audit year	2020/21	Priority	2
Recommendation	The security at the Depot be reviewed and appropriate action taken to keep the site secure by use of both physical security measures (a working gate) and via adequate surveillance.				
Initial management response	These are both longstanding issues and indicative of a lack of regular maintenance and investment by the authority into what are ailing facilities. Both are included in the current depot feasibility study and require financial investment to rectify.				
Responsible Officer/s	DSO Manager / Corporate Head of Environmental Services	Original implementation date	Long term remedy dependent of the outcome of the feasibility study due to report in Sept 2021.	Revised implementation date	TBC
Latest Update	It was advised by the Depot Manager that there have been no further developments since the previous audit due to unfilled vacancies (nearly 1/3 of the staff) within the office staff at the depot. Due to the limited amount of staff available to run and deliver the daily operations all the staff time has been devoted to ensuring the operations are run and delivered in continually difficult times. The Depot is subject to a separate, full follow up review during 2022/23 and therefore this recommendation will be considered as part of that review.				
Status	Outstanding				

Audit title	Depot	Audit year	2020/21	Priority	3
Recommendation	Consideration be given to the purchase of the optimisation route package.				
Initial management response	Agreed. Finance was sought for this upgrade by the DSO but not forthcoming due to present financial pressures. A report to be made to the relevant committee requesting funding to upgrade the system.				
Responsible Officer/s	DSO Manager /CHoES	Original implementation date	30/09/21	Revised implementation date	TBC
Latest Update	It was advised by the Depot Manager that there have been no further developments since the previous audit due to unfilled vacancies (nearly 1/3 of the staff) within the office staff at the depot. Due to the limited amount of staff available to run and deliver the daily operations all the staff time has been devoted to ensuring the operations are run and delivered in continually difficult times. The Depot is subject to a separate, full follow up review during 2022/23 and therefore this recommendation will be considered as part of that review.				
Status	Outstanding				

Audit title	Depot	Audit year	2020/21	Priority	3
Recommendation	Detailed stock take procedures be documented and a re-order level established, where appropriate.				
Initial management response	Noted.				
Responsible Officer/s	DSO Manager /CHoES	Original implementation date	30/09/21	Revised implementation date	TBC
Latest Update	<p>It was advised by the Depot Manager that there have been no further developments since the previous audit due to unfilled vacancies (nearly 1/3 of the staff) within the office staff at the depot. Due to the limited amount of staff available to run and deliver the daily operations all the staff time has been devoted to ensuring the operations are run and delivered in continually difficult times.</p> <p>The Depot is subject to a separate, full follow up review during 2022/23 and therefore this recommendation will be considered as part of that review.</p>				
Status	Outstanding				

13. Housing Health & Safety

Audit title	Housing Health & Safety	Audit year	2021/22	Priority	3
Recommendation	Legionella risk assessments be documented for the general housing stock.				
Initial management response	Management agrees with the recommendations and will ensure that a general risk assessment for GN properties is adopted as part of our wider suite of process, policies and risk assessments.				
Responsible Officer/s	Compliance Manager / Head of Housing Technical Services	Original implementation date	31/03/22	Revised implementation date	31/07/22
Latest Update	<p>It was advised that risk assessments have been completed for the Retirement Schemes, but a general risk assessment for all domestic stock is still required. The Compliance Manager left in January 2022 and the position was subsequently filled in April.</p> <p>A revised target date has been set for 31 July 2022.</p>				
Status	Outstanding				



Complaints and Compliments Quarter 1 2022/2023 (Law and Governance, Clare Pinnock)

Synopsis of report:

To provide Members with a summary of the complaints and compliments received from 1 April – 30 June 2022 (Quarter 1 of the KPI reporting structure), and report any matters that have arisen since the meeting of the Committee in May 2022.

Recommendation(s):

None. This report is for information.

1. Context of Report

- 1.1 The Council maintains a spreadsheet of formal complaints which have been recorded (and a separate register for those in which the Local Government and Social Care Ombudsman (the Ombudsman) has been involved), what they relate to and how they have been resolved. We maintain a similar spreadsheet for compliments and there is an overdue complaints register which helps us keep track of unresolved complaints.

2. Report

- 2.1 The Council's Complaints Procedure regards complaints as '*an expression of dissatisfaction about a Council service (whether the service is provided directly by us or by one of our partners/contractors) which requires a response.*' This is in line with the definition of a complaint that the Ombudsman recommends.
- 2.2 Corporate Heads are responsible for ensuring that complaints are dealt with and compliments recorded in a timely way and that entries on the central registers are accurate and comply with the General Data Protection Act. Service Requests, and people seeking information and explanations of Council policy are not generally regarded as complaints. Nevertheless, they should still be dealt with in a timely manner, be as helpful as possible to avoid a complaint being lodged subsequently and to maintain a high standard of customer service to our residents, businesses and visitors to the borough.
- 2.3 There were 26 entries in the complaints register and 24 compliments recorded in Quarter 1 of 2022/2023.
- 2.4 **Complaints Quarter 1 2022/2023**

The table below sets out the figures for Quarter 1 2022/2023:-

Business Centre	Quarter 1
Assets and Regeneration	0
Community Development	0
Community Services	1
Corporate Services	0
Customer, Digital and Collection Services	2
Development Management and Building Control	0
Economic Development and Planning Policy	0
Environmental Services	8
Financial Services	0
Housing	15
Human Resources	0
Law and Governance	0
Total	26

- 2.5 Of the 26 complaints recorded, 8 were upheld or partly so, 8 were not upheld, 7 are overdue and the remaining 3 are in progress or have not yet reached the deadlines for Officers to respond which are in Quarter 2.
- 2.6 Members have requested some analysis of complaints and compliments and any emerging themes around complaints. There were 15 complaints about Housing related issues this quarter which is higher than usual, but Members are asked to note that only 6 of these were upheld or partly so. These concerned the general condition of properties and after inspection remedial works were successfully undertaken and resolved. There were also issues relating to residential developments where residents in the vicinity have experienced noise and limited parking and the relevant contractors have been contacted to resolve accordingly.
- 2.7 Complaints that were not upheld also concerned the condition of properties, issues with neighbours and a number of Housing related policies and others where a third party was responsible.
- 2.8 There have been occasions where miscommunication between departments, has resulted in a complaint. For example, where each thinking the other had

responded highlighting the importance of joined up thinking and clear communication with residents.

- 2.9 Complaints often arise because there has been a delay dealing with enquiries. This seems to be the case where teams are stretched owing to unfilled vacancies or other absences combined with the general volume of work experienced in business centres.
- 2.10 Other complaints were not about the team allocated on the register but they were the main contact for the resident. In some cases the Council cannot resolve something until a third party has provided the information needed.
- 2.11 There were three complaints regarding the physical appearance of the borough, in places people thought they were looking tired and unloved, not being litter picked and lots of weeds growing in the drains. It is difficult to resolve these complaints with limited resources and shared responsibility with other bodies. However, Members will be aware that it is anticipated we will have more flexibility and joined up thinking once the Grounds Maintenance is brought back in house.
- 2.12 If Members have any queries regarding particular service areas these can be referred to the relevant Corporate Head.
- 2.13 **Compliments Quarter 1 2022/2023**

Business Centre	Quarter 1
Assets and Regeneration	
Community Development	5
Community Services	1
Corporate Services	4
Customer, Digital and Collection Services	4
Development Management and Building Control	
Economic Development and Planning Policy	
Environmental Services	2
Financial Services	
Housing	8
Human Resources	
Law and Governance	
Total	24

- 2.14 There were 24 compliments received for Quarter 1 2022/2023. The details, where staff were named or identifiable from the information provided, are set out in Exempt Appendix 'A'.
- 2.15 There were some compliments that were shared between teams particularly Housing Maintenance and the Home Improvement Agency. It was positive to see Housing getting 8 compliments across the Business centre mainly for the care and attention paid by individuals and teams to our residents.
- 2.16 The breakdown of complaints and compliments in Quarter 1 for 2022/2023 by Ward is set out below (- denotes complaints and + compliments)

Ward	Quarter 1	
	-	+
Addlestone North	4	3
Addlestone South	3	3
Chertsey Riverside	2	
Chertsey St Ann's	3	2
Egham Hythe	4	4
Egham Town	4	1
Englefield Green East		
Englefield Green West	1	
Longcross, Lyne and Chertsey South		
New Haw	1	1
Ottershaw		1
Thorpe		2
Virginia Water	2	
Woodham and RowTown		1
Out of Borough	1	6
Unrecorded	1	
Totals	26	24

- 2.17 Recording complaints and compliments is a valuable tool for the Council to review performance and improve the delivery of services.
- 2.18 After the last meeting we issued the letters and certificates to recognise the various staff receiving compliments. These were well received and staff feedback was that they were pleased to have something positive and it made them feel more valued.
- 3. Policy framework implications**
- 3.1 The Complaints policy and procedures are reviewed regularly to provide up to date guidance to staff completing the registers and to ensure reporting is accurate.

4. **Resource implications**

- 4.1 The registers are co-ordinated by an Officer in Law and Governance; on behalf of the Monitoring Officer, but time is also spent by other Officers, particularly in Housing whose input is much appreciated.

5. **Equality implications**

- 5.1 The Council has a duty under the Equality Act 2010. Section 149 of the Act provides that we must have due regard to the need to;

- a) eliminate discrimination, harassment, victimisation and other conduct prohibited by the Act
- b) to advance equality of opportunity
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share protected characteristics.

We should at all times act in a way that is non-discriminatory through our policies and procedures and interactions with people.

- 5.2 In the last reporting period there were 10 compliments which can be identified as relevant to the protected characteristics of age and/or disability one complaint that could be identified as relevant to race and another to disability.

(For information)

Background papers

The Complaints and Compliments Registers held on the Council's feedback drive and relevant (part exempt) emails on the Council's outlook system.

By virtue of paragraph(s) 1 of Part 1 of Schedule 12A
of the Local Government Act 1972.

Document is Restricted