

## Internal Audit

# Final Internal Audit Report

## Cultural Compliance Community Support Services 2019/2020

Report Status	Final
Report Date	June 2020
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Issued to	Melanie Bussicott
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## Management Summary

The audit was undertaken in Community Support Services (CSS) and the purpose of the review was to confirm compliance with corporate and service policies and procedures. The findings will support the Head of Internal Audit's annual opinion statement on the overall adequacy and effectiveness of the Council's systems of internal control.

Internal Audit's remit includes the organisation's entire control environment and allows for unrestricted access to all records and assets deemed necessary by auditors in the course of the audit.

The scope of the audit focussed on the following key control areas of CSS set out below:

- Performance Management
- Budgetary control
- Procurement
- Fees Charges and Income Collection
- Recruitment and Appointment of Staff
- Disclosure and Barring Service (DBS) Procedures
- Staff Supervision and Training
- Security of Assets
- Social funds
- Transport services
- Meals on Wheels
- Alcohol licensing

This audit review has encompassed the entire range of the services provided by CSS. Internal Audit has engaged with both the Head of CSS and a number of service managers across several Centres together with staff at both the Civic Centre and at the transport office.

A number of CSS officers made their time readily available to Internal Audit during the review and Internal Audit acknowledges this assistance from the service.

Internal Audit recognises that CSS is a vitally important front-line service of the Council that provides a very broad range of service provision throughout the Borough to large numbers of customers who are in the main elderly and vulnerable clients.

This service is led by the Head of CSS supported by over 100 EBC staff and a large number of volunteers across all Centres.

The Council's 2019/20 CSS budget is for net expenditure of £3.4 million.

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Service delivery is primarily from seven Community Centres throughout Elmbridge and a team based at the Civic Centre together with the CSS transport team located at the Council depot in Esher from where the transport service is now delivered.

The service has an important interface with Council members and the Portfolio Holder for Social Affairs.

This audit report is an exception based report detailing findings from audit enquiries and testing across significant elements of CSS.

There are significant findings in the following key control areas:

- Budgetary control
- Recruitment and appointment of staff
- DBS procedures
- Staff supervision and performance management
- Transport services
- Alcohol licensing

The audit findings are for consideration by the Head of CSS and also the Council Management Board.

Internal Audit intends that this process of consideration will result in actions developed by the service management that will generate positive improvements for the service and for the ultimate benefit of the Council overall.

### **June 2020**

In mid-March 2020 the COVID-19 national public health emergency arose. This necessitated all available Council resources being made available for the Council's emergency response as a priority from 19 March 2020 when a major incident was declared in Surrey.

The Head of CSS informed Internal Audit that due to this requirement all her available resources were being directed towards the COVID-19 emergency response.

Therefore, it was not possible for Internal Audit to further progress this report with the Head of CSS or for Internal Audit to finalise this report as planned in March 2020. Internal Audit agreed that this would be postponed until the end of the COVID-19 emergency phase.

Internal Audit acknowledges that during this period the Head of CSS led the welfare cell of the Council's emergency COVID-19 response in addition to managing the provision of CSS to the borough's elderly and most vulnerable residents.

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The operation of CSS as a major front-line service throughout the COVID-19 emergency comprised a markedly changed service delivery to the usual provision including:

- the essential closure of all Centres across the Borough and the associated consequences
- a large resultant increase in the Meals on Wheels service
- a large number of daily welfare calls to shielding and other vulnerable residents
- provision of Community Transport service in different ways, eg. providing more assistance to the Meals on Wheels service and assisting with food parcel deliveries to shielding and isolated vulnerable residents.

CSS staff have been at the front line of this changed service delivery during the emergency period in conjunction with assistance from other Council teams eg Environmental and Housing, and with the assistance of volunteers as appropriate.

During this time a new Community Transport Manager started with the Council in April and a new CSS administrator has also been appointed to provide additional support to the Head of CSS.

During May and early June the Council has been planning the Recovery phase of the COVID-19 emergency and this is continuing.

For CSS moving forward the Head of CSS will be planning service provision to support the Borough's most vulnerable residents from mid-2020. Key elements of the service eg. Centres and Community Transport provision will need to be recommenced and rescheduled when possible and the Meals on Wheels operation revised as necessary.

Therefore, Internal Audit anticipate that the agreed actions from this audit review take account of these factors and of the current context and operation of CSS at this important time.

The suggested timescales for actions are aimed to take account of the current COVID-19 recovery phase over the forthcoming weeks.

Overall positive and pragmatic improvements are a key aim of this report in order to mitigate risk and enhance control for the benefit of the service and for the ultimate benefit of the Council.

Internal Audit acknowledges the cooperation received and input throughout this review by the Head of CSS and her management team.

The Head of CSS has responded to the findings set out in this report and has drawn up an Action Plan as attached at Appendix A containing her proposed actions in these areas.

Internal Audit suggests this provides a mechanism by which progress in these areas can be undertaken by CSS over the coming weeks.

Internal Audit has noted that the Head of CSS plans to implement the actions during quarter 2 by the end of September 2020.

## Summary of Findings

### **Performance Management**

CSS performance indicators are presented in a quarterly dashboard to CMB under the title of Social Affairs and the auditor confirmed KPIs are reported to Cabinet on a quarterly basis. Results indicate targets are being achieved.

Examination of individual risk entries in the service operational risk register determined a number of risks required review.

### **Budgetary Control**

The Head of Service is solely responsible for managing and controlling the five areas of the CSS budget. Budget responsibilities are not delegated to operational level managers. e.g. Community Centres, Transport.

The auditor noted the CSS profile budget as at the end of period 9 (December 2019) indicated an overall adverse variance of £99,346.

A more detailed review of the budget revealed there were instances of:-

- Actual spending where no budget provision was allocated.
- Actual income where no budget provision was allocated.
- Overspending of allocated budgets.
- Underperforming income budgets.

Although audit confirmed evidence of liaison between the budget holder and the service accountant we observed it could be stronger. We concluded the budget monitoring arrangements were not rigorous and challenging, there was insufficient evidence to confirm line by line management of budgets where variances fell outside of tolerable levels.

### **Procurement**

Through audit testing it was confirmed that there were occasions when CSS purchase card holders failed to complete their expense reports in a timely manner.

There were instances where purchase card holders failed to include in their expenses report documentary evidence to support individual transactions e.g. receipts, invoices etc.

### **Fees Charges and Income Collection**

The auditor examined fees, charges and income collection activities at two Community Centres i.e. Claygate and Cobham and confirmed the receiving, recording and banking of income was generally satisfactory. However, there were several areas of activity where there was no corresponding evidence to support income transactions. Centre management relied on the honesty and trust of officers and volunteers to ensure all income received was banked.

Testing of tea bar transactions revealed a number of discrepancies between the Z readings produced by the cash till and the banking sheet. The amounts involved were not material, however the measures adopted for dealing with discrepancies were unsatisfactory.

The auditor confirmed that both Claygate and Cobham had a Daily Operations Manual which included chapters on Income and Banking. The manager at Cobham expressed the opinion the manual was out of date and may require review.

Discussion with the manager at Cobham established he was unclear about some of the responsibilities required to fulfil the role and he was keen to get feedback from the audit.

### **Petty Cash**

Finance provided audit with the record of Petty Cash floats at centres. The record indicates that Claygate has £100 and Cobham nil. In discussion the Head of Finance indicated Centres should pay back petty cash floats as these were now redundant.

### **Recruitment and Appointment of Staff**

Results of recruitment test checking on a sample of CSS employees were mostly satisfactory, however there were a few examples where insufficient evidence was presented to confirm identity and DBS checks were undertaken.

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The auditor received details of all CSS agency transactions in the 2019/2020 financial year. It was found that a number of transactions were not processed through the corporate process (Matrix).

Review of the establishment list indicated the following:

- There were 271 posts listed in the CSS establishment.
- There were a number of employees who had multiple posts.
- There were 94 posts where no payments were made in the year 2019/2020, this would suggest they are no longer required.
- Due to the above complications the Head of Finance was reluctant to use the CSS establishment list for budgeting purposes.
- Because of officers being employed across multiple roles and grades, there were instances where payments to CSS staff were incorrect, delayed, and placed avoidable administrative burdens on staff in Finance.

There is the potential to review the establishment list to create more generalist Job Descriptions to remove multiple postholders.

### **DBS Procedures**

#### **Staff Supervision and Training**

The auditor requested records of training undertaken by CSS staff members. There were a number of areas where the auditor could not confirm staff members had completed the required training.

In discussion with the HOS audit was provided assurances records are being updated and the appropriate training is being undertaken by all CSS staff.

### **Security of Assets**

The auditor obtained a list of motor vehicle plant and equipment assets held by CSS. When the list was compared with the insurance schedule a number of discrepancies were identified where vehicles appeared on one schedule and not the other. Further investigation revealed the vehicles had been sold but were recorded as insured by Elmbridge.

A physical count of vehicles located at the depot was undertaken and matched against the operational schedule. All the vehicles expected to be at the depot were confirmed to be in existence at the depot by an audit visit.

Managers of vehicles where drivers are allowed to take them home were requested to confirm the business case for this practice. The explanations were reasonable, and the HOS had given approval however this provision may be classed as a Benefit in Kind by HMRC.

### **Social Funds**

The arrangements for social funds were reviewed at Claygate and Cobham. It was established management of social funds are at the managers discretion. The fund records at Claygate were in good order and documentary evidence of fund transactions was maintained. At Cobham the manager indicated until recently fund records were not maintained however since mid – January he has started keeping records and will do so going forward.

There are general notes in the Daily Operation Manuals covering the activities of the Managers Social Fund. However, the notes do not provide details of how transactions of the fund should be recorded and what evidence should be retained to support them.

### **Transport Services**

Documented procedures, guidelines, instructions and templates for a number of transport processes were made available to the auditor. These were retained on the Transport Services G drive. Not all drivers have access to the EBC network therefore it is unclear how they are able to access procedures. It was also unclear whether the procedures presented to audit were comprehensive e.g. they did not include a procedure covering Fuel Cards.

The Transport Service records (CATT) did not contain the service history of all CSS vehicles.

Audit could not confirm if drivers had undertaken First Aid, Safeguarding, Fire Extinguisher usage and Lone Working training.

The auditor confirmed a vehicle tracking system (RAM) was in operation at Transport Services (TS). Testing revealed a vehicle which was sold (██████████) still had an EBC tracker unit attached to it and was registering on RAM.

The auditor reviewed a report from the RAM system which recorded the speeds of vehicles during their daily runs. It was found that one vehicle ██████████ over a two-week period in February 2020 had consistently driven over the speed limit and if apprehended would have been liable to a 3-point penalty (twice).

The TS acting manager (Senior Scheduling Officer) does not review the fuel invoice before it is approved for payment. The lack of review at the operational level has resulted in a number of inaccuracies remaining unidentified. Review of the January 2020 invoice revealed e.g.:

- A number of transactions where the costs for other services were not recharged. Changes in vehicles were not notified to the officer processing

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the invoice for payment, therefore the cost allocation template for charging out fuel costs was outdated.

- Vehicles were recorded refueling with premium diesel which is higher cost than the regular diesel fuel normally purchased.

### **Meals on Wheels**

Meals and wheels are provided as a service from multiple Community Centres. Meals are cooked on site before being distributed from the site. On this basis there is potential for achieving efficiency by rationalising the preparation of meals to one centre and distributing from the one site.

Testing was undertaken at the Molesey Centre and Audit examination of procedures indicated they were outdated and required to be reviewed. Review of spend on provisions against income from meals identified that there was below expected income but costs on supplies had risen.

The auditor established there were no inventory records documenting the movement of provisions in the preparation of meals. Annual stocktaking was discontinued two years ago.

The auditor established there was no separation of records and stock identifying meals prepared for centre and meals on wheels.

### **Alcohol Licensing**

From audit enquiries at Cobham and Molesey Centres it was established that alcohol is held on the premises and is sold mainly for events held on the premises.

Audit enquiries found that although Premises Licenses are in existence the Designated Premises Supervisor (DPS) named on the licenses is incorrect and outdated and the persons named on the licenses may no longer be based at the establishment.

**Assurance Opinion (see Appendix 1 – Definition)**

**Due to the wide scope and multiple sites visited an assurance opinion is provided against each of the key areas tested.**

Performance Management	<b>Some Improvement Needed</b>
Budgetary Control	<b>Major Improvement Needed</b>
Procurement	<b>Some Improvement Needed</b>
Fees & Charges, and Income Collection	<b>Some Improvement Needed</b>
Petty Cash	<b>Some Improvement Needed</b>
Recruitment and Appointment of Staff	<b>Major Improvement Needed</b>
DBS Checks	<b>Major Improvement Needed</b>
Staff Supervision and Training	<b>Major Improvement Needed</b>
Security of Assets	<b>Some Improvement Needed</b>
Social Funds	<b>Some Improvement Needed</b>
Transport Services	<b>Major Improvement Needed</b>
Meals on Wheels	<b>Some Improvement Needed</b>
Alcohol Licensing	<b>Major Improvement Needed</b>

**Acknowledgement**

Internal Audit would like to take this opportunity to thank the Head of Service Community Support Services and her team for the help and assistance received during the audit.

## Appendix 1

### Assurance Opinion - Definition

<b>Effective</b>	Controls evaluated are adequate, appropriate, and effective to provide reasonable assurance that risks are being managed and objectives should be met.
<b>Some Improvement Needed</b>	A specific control weakness was noted; generally, however, controls evaluated are adequate, appropriate, and effective to provide reasonable assurance that risks are being managed and objectives should be met.
<b>Major Improvement Needed</b>	Numerous specific control weaknesses were noted. Controls evaluated are unlikely to provide reasonable assurance that risks are being managed and objectives should be met.
<b>Unsatisfactory</b>	Controls evaluated are not adequate, appropriate, or effective to provide reasonable assurance that risks are being managed and objectives should be met.

### Priority

<b>High</b> 	Urgent action required to reduce exposure to high risk / Major adverse impact on achievement of organisational objectives.
<b>Medium</b> 	Action required to avoid exposing the organisation to significant risks.
<b>Low</b> 	Desirable action to enhance control, improve value for money and minimal impact on organisational objectives.

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
1	<p><b><u>Performance Management</u></b></p> <p>A copy of the CSS 2019/2020 service delivery plan was obtained. The plan illustrated in a matrix format the links between council priorities, council objectives, key service objectives, actions, deadlines and the identity of resources required to complete actions. Periodically the plan is reviewed to determine whether objectives are being achieved.</p> <p>CSS performance indicators are presented in a quarterly dashboard to CMB under the title of Social Affairs: the auditor confirmed KPIs are reported to Cabinet on a quarterly basis. Results indicate targets are being achieved.</p> <p>Examination of individual risk entries in the service operational risk register determined a number of risks required review.</p>	<p>Potential risks to service objectives may not be identified.</p>		<p>Management to continue to develop the service delivery plan in partnership with Managers linking to Council priorities and objectives, developing Council and Service objectives accordingly, monitoring through team and individual meetings and personal 1:1 discussion.</p> <p>Any outstanding risk assessments would be updated by August.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Centre Services and Policy Manager</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>31.08.20</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
2	<p><b><u>Budgetary Control</u></b></p> <p>The CSS budget is approved by CMB and Members of the Council. The CSS budget performance is reported monthly to CMB and quarterly to Cabinet.</p> <p>The Head of Service is responsible for managing and controlling the five areas of the CSS budget. Budget responsibilities are delegated to managers at operational levels. e.g. Community Centres, Transport.</p>	<p>If CSS operational managers are not involved with the budget managing or monitoring process they may not own budget items which they are directly responsible for eg. Centre managers – spending decisions on provisions. Control of maintenance and utility costs.</p>	<p></p> <p></p>	<p>It is not the case that there is no management or budgetary control by Managers over the 5 areas. Voluntary Sector Manager manages all budgets with respect to Voluntary Sector spend. Feedback from Manager; “I ensure that all Voluntary Sector Organisation are paid, I manage spend on the annual grants and the partnership fund, marketing and associated areas. I recognise that your only involvement is signing the annual fund spread sheet providing appropriate audit control”.</p> <p>Cobham Centre Manager manages budget for all Community Alarm and Telecare spend. Feedback from Manager “I can confirm that I have total responsibility for all areas of spend on the Community Alarm Budget” Dementia Services Manager signs timesheets, mileage and is responsible for ensuring invoices are sent and all purchases of furniture and equipment,</p>

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			<p><b>R</b></p> <p>publications, and other expenses. The only area that the Head of CSS has direct involvement in is securing grants from SCC or ICP.</p> <p>With respect to Centres, as was explained at the beginning of the audit, a Centre Manager has been off sick for 20 months. However Centre Managers have always had complete control over all provisions and all associated day to day expenditure. The report states that is a risk with Managers not having operational control maintenance or utilities. CSS has no control over utilities or the majority of the maintenance this is controlled by AMPS.</p> <p>There was a vacancy with respect to the Transport Manager since August 19 to April 20.</p> <p><b>TRANSPORT</b> The Head of Service, Centre Services and Policy Manager, Voluntary Sector Manager supported transport with management responsibilities over period.</p> <p>As Centre Support and Policy Manager feedback “I authorise invoices, all services and repair/RAM agreement and</p>
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	<p>The auditor obtained the CSS profile budget as at the end of period 9 (December 2019).</p>	<p>Transport manager – maintenance and service costs, fuel costs</p> <p>Budgetary assumptions and estimates may be inaccurate</p>	<p>actioning vehicle purchase of new vehicle whilst supporting transport” As Head of CSS I actioned iTrent in Manager absence.</p> <p><b>CENTRES</b>  Centre Managers are totally responsible for all food provisions spend for Centres and MOWs, all stock purchased from the Butchers, fruit and veg and dried goods ,all weekly food costs, planning and ordering and costings for all special lunches, all ordering for the tea stock, all Social Funds and all expenditure related to the use of these monies , fundraising, collection of all income, ordering of eggs, cards and sales stock, ordering of all stationery, clothing and all kitchen equipment. The Centre Services and Policy Manager has responsibilities for overseeing all capital and maintenance budgets that we have responsibility. The majority fall within AMPs responsibility. CSS has no responsibility for reviewing or evaluating utility costs, conditions survey work and planned maintenance, totaling £224k Re-</p>
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		<p>resulting in budgetary control issues, cost overruns and under-performing income budgets.</p>	<p>tending of cleaning contract – CSS was not involved.</p> <p>Centre Services and Policy Manager has a robust system for monitoring furniture and equipment, fixtures and fittings based on identified needs. If the budget was to divide 7 ways this would put overall pressure on the budget process and would need an uplift. For example, Molesey Centre has had a freezer out from December to February at a weekly freezer hiring cost of £400 pw which was around £6k repair costs alone. For further evaluation see appendix A. With no Senior Centre Manager there has been challenges with respect to Centre Services and Policy Manager/Head of Community Support Services having the time or the resources to action some of the structured planning areas/capital projects. An administrator on a one-year fixed term contract joined in May which has allowed a range of Centre operational reviews to commence.</p> <p>The Community Transport Manager has total responsibility for</p>
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<p>Report totals indicated there was an overall adverse variance of £99,346. A detailed examination of the budget revealed the adverse variance was predominantly caused by underperforming income budgets. There were examples of: -</p> <ul style="list-style-type: none"><li>• Actual spending where no budget provision was allocated.</li><li>• Actual income where no budget provision was allocated.</li><li>• Overspending of allocated budgets</li> <li>• Underperforming income budgets.</li></ul> <p>There were significant variances in the Centres budget lines for salaries, overtime, wages, agency and associated costs.</p> <p>There was underperformance of the Centre Meals income budget which indicated less meals had been sold than predicted. The</p>	<p>Variations in budgets may not be identified and reported.</p>	<p>maintenance, servicing and fuel costs but we have no Manager at the time of the audit. These areas were actioned by the previous Manager, however with the new Manager these will be two actions that have already been identified in a comprehensive review document to review accordingly.</p> <p>It is totally accepted that at any point in time it is variable as to whether some of our larger grants or funding has been received within the year. The financial report received on the 2 March to coincide with receiving this report demonstrated that with respect to the first area of budget review with respect to employees, premises, transport supplies, third party support service and capital costs combined with income, the profile budget was £1,664,184 but the actual plus commitments was £1, 655,642 accepting a £80,542 variance, however invoices have been submitted to Surrey County Council for quarter 3 and quarter 4 at the start of January.</p> <p>In the monitoring reports received from finance there was no individual</p>
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<p>expectation therefore would be the provisions purchasing budget would show a corresponding decrease in expenditure, this however was not the case.</p> <p>The expenditure on provisions stock did not correspond with the decrease in meals sales and was higher than expected. CSS management indicated there were higher than anticipated price increases for provisions during the year and this accounted for the increase in expenditure.</p> <p>There was a significant underspend variance in the Meals on Wheels Salaries budget this was partially mitigated by the actual expenditure on Wages where there was no budget allocation.</p> <p>There was a significant underspend variance in the Transport Services (TS) Salaries budget. There were overspends in the budget for Wages and also the Agency Staff. Audit understand the above relates to the Transport</p>	<p>Budget overspends, and underspends may not be controlled or managed.</p>	<p>breakdown by Centre in terms of annual profile and commitments to dates. There were summaries with respect to expenditure, so it is the overall monitoring that takes place. Cobham Link £17,078 ahead of profiled income. There were large variations when drafting this response within the Meals on Wheels where we have a profile budget at this point of £109,976 but an actual expenditure of £78,996 however there is no expenditure against provisions where there is an estimate at this point of the year of £92,477 so there is clearly a transfer still to take place into provisions. A percentage spilt occurs between Centres and MOW Community Alarm ahead of income at this point should be £307, have £311k The Community Alarm Manager feedback is “I believes the discrepancy at the time for Community Alarm comes under salaries is where there was a commitment to re-grade the Manager’s position and the establishment of a 24 hours a week fixed term contract for a Community Alarm and telecare installer during the year, so this budget needs to be</p>
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	<p>Managers vacancy. There were other areas of the TS budget where noteworthy under/overspends occurred e.g. servicing and rents.</p> <p>Although audit confirmed evidence of liaison between the budget holder and the service accountant we observed that it could be stronger. Our conclusion was that the budget monitoring arrangements were not rigorous and challenging, and there was insufficient evidence to confirm line by line management of budgets where variances fell outside of tolerable levels.</p>		<p>reflected accordingly by next year.”</p> <p>A request was made by Head of Service in the initial meeting for actual details on these areas – welcome further information.</p> <p>Welcome the opportunity to review with finance colleagues, salary allocation accordingly ensuring there is a line up on timesheet codes particularly for casual staff. Monthly meetings being requested. See appendix A.</p> <p>The £30k underperformance in Centre meals income was known and a detailed analysis has been provided to Strategic Director. It was highlighted that we have seen meal numbers reduce against increases in tea bar/hiring income, activity levels etc. This reflects current use of Centres which is likely to continue.</p> <p>We have seen cost pressure</p>
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			<p>increases in provisions costs. There was going to be a review before the Senior Centre Manager went off with severe illness and in the last month an Administrator joined us, and this review has started. Centres are working on a £1.45 food cost each day and a full review of this area is also taking place. This review is currently progressing well with detailed spreadsheets in terms of Centres, food cost expenditure and key contact requirements going forward. This is not going to take away what we know is an anticipated fall in Centre meals activity and we will need to review further when the Centres reopen. It is more of a reflection that food provisions have seen a significant increase and yet we have not had any change in our provisions budget for several years. The comprehensive Food Cost and Pelican review will allow us to determine food and provision costs for the future.</p> <p>Regular meetings being requested with finance colleagues and would be welcomed.</p>
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			<p>In March we have not had a Transport Manager in place since August 19. New Manager started in April during Covid-19 and our totally focus has been on maintaining COVID Services, starting transport reviews as time allows, taking forward a SEN enrolment and completing a Rural Mobility Funds so a great deal has been achieved in a short period of time with the new manager. We have also needed to use more casual staff to support the overall service. We recognise there is a current overspend in transport, however this is related to amendments that have not taken place with respect to the loss of the hub transport contract. This loss resulted in a review with the Finance Manager in summer 19 where we removed the Fleet Officer and a driving post accordingly. We recognise that there is an overspend of servicing due to the ageing fleet, rents and move to the depot. A Fleet Review is currently taking place and to find saving it is proposed that the transport team moved out of the depot which would secure a £60K plus saving.</p>
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				Budget monitoring reports are distributed to Voluntary Sector Manager, Community Alarm Manager, Centre Services and Policy Manager and the Transport Manager.
Responsible Officer:		<b>Head of CSS and CSS Manager</b>	<b>Target Implementation Date</b>	<b>Some areas already fully actioned/All completed by September 2020</b>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
3	<p><b><u>Procurement</u></b></p> <p>The auditor obtained a list of approved purchase card holders in CSS. This was matched to signed agreements authorised by the card holders line manager confirming they were approved card holders. It was found that agreements for one purchase card holder were not located at the time of audit (January 2019).</p> <p>The auditor examined CSS purchase card transactions for the period August September and October, it was confirmed that none of the transactions exceeded the £500.00 individual transaction spending limits and there was no disaggregation of expenditure to keep under the limit.</p> <p>The accounts payable officer presented evidence to the auditor which indicated that on frequent occasions CSS purchase card holders failed to complete their expense reports in a timely manner. The accounts payable officer was required to chase CSS officers to enable completion of the reconciliation exercise. The auditor observed an example of one officer's</p>	<p>Unauthorised use of purchasing card may occur.</p> <p>There may be no documentary evidence to support purchase card transactions.</p>	<p></p> <p></p>	<p>It is accepted that Centres are under considerable pressure with no Senior Centre Manager in post. Two new Managers have just been appointed, one transferring and one external.</p> <p>Robust guidance email has been sent on 16/06/2020 to all procurement card holders with appropriate link to the procedure. Further detail in Appendix A. Copy of email set to the Finance Procurement Card lead</p>

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	<p>purchasing card being suspended for late submission of an expense report.</p> <p>Discussion with the senior accountant and the accounts payable officer indicated there were occasions when purchase card holders failed to include in their expenses report documentary evidence to support individual transactions e.g. receipts, invoices.</p>	<p>Inappropriate expenditure resulting from a failure to comply with the Council's procurement rules and procedures.</p>		<p>It is acknowledged that with the level of transactions that Centre Managers are undertaking that there are on occasions receipts that are lost. Head of CSS when checking and authorising and reviews accordingly and the receipts which tend to be lost are supermarket receipts for buying milk and small tea bar items. This is monitored when authorising. Also see action above.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Head of CSS</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>31 August 20</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
4	<p><b><u>Fees, Charges and Income Collection</u></b></p> <p>The auditor examined fees, charges and income collection activities at two Community Centres i.e. Claygate and Cobham and confirmed the receiving, recording and banking of income was generally satisfactory. However, the following was observed.</p> <p>There were several areas where income is generated within centres where there was no corresponding evidence to support income transactions. Centre management relied on the honesty and trust of officers and volunteers that all income received was banked. e.g. bathing services, dial a ride, hairdressing, reflexology and the tea bar.</p>	<p>All income received may not be banked.</p>	<p></p>	<p>It is recognised that hairdressers and reflexologists pay they daily charges to the Centre Manager where it is recorded but not a receipt issued.</p> <p>We are very keen to progress with scaling up electronic financial transactions with the availability of hand-held devices at Centres and in transport which could be key to Dial A Ride payment and in due course centre payments.</p> <p>We had an Officer on placement with us since April and this was the project we had planned for her, but finance do not wish us to progress and make enquiries to a Council supplier to understand how an electronic system might work for us currently and they are unable to support us at the current time. So, we have been unable to progress with</p>

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<p>Testing of tea bar transactions revealed a number of discrepancies between the Z readings produced by the cash till and the banking sheet. The manager at Claygate indicated if the till is short, they take money from the social fund. If the till is over, they put money into the social fund. The manager at Cobham indicated the existence of an “under or overs pot”, if the differences are small they are taken or added to the pot as appropriate.</p> <p>The auditor confirmed that both Claygate and Cobham had a Daily Operations Manual which included chapters on Income and Banking. The manager at Cobham expressed the opinion the manual was out of date and may require review.</p> <p>Finance provided audit with the record of Petty Cash floats at centres. The record indicates that Claygate has £100 and Cobham nil. Testing at the centres confirmed the accounting records. However, Claygate management indicated the Petty Cash was never used. Refunding of minor expenses was made from income takings and accounted for on the banking sheet.</p>	<p>Unauthorised practices may be introduced.</p> <p>Accounting records may be inaccurate.</p> <p>The Daily Operations Manual may not reflect the current activities of Community Centres.</p> <p>Petty cash funds may be surplus to requirements.</p>	<p></p> <p></p> <p></p> <p></p>	<p>the planned project. See appendix A</p> <p>It needs to be accepted that they are all volunteers in the tea bar. It is accepted that Centre management relies on honesty from officers and volunteers. Clearly one way of taking away this risk is to employ staff in the tea bar and introduce hand held devices and not take payments. However, the introduction of paid staff would have considerable cost to the authority. Centre Managers have ensured banking returns are completed on the principles agreed. We do acknowledge that the tea bar volunteers are mostly retired and potentially on an occasion the change provided might not be correct which results in small discrepancies. Manuals are currently being reviewed across Centres with 2 Centre Managers recently leaving that was one of the key tasks they actioned before they left, and we would look to complete the review, reviewing to ensure consistently by the end of July as Covid-19 had been all consuming since March.</p> <p>The Head of CSS will review with Managers about paying in petty cash floats (having said that they have been useful during Covid-19 to pay driver expenses when</p>
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	<p>In discussion with the Head of Finance it was established that Centres should pay in and bank petty cash floats as these were now redundant.</p>		<p>Centres are closed but we can find appropriate work around on these occasions.)</p> <p>The Head of CSS will be contacting the Head of Finance to action floats being returned.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Head of CSS</b></p>	<p><b>Target Implementation Date</b></p> <p><b>31 July 20 (petty cash returns) Electronic transactions tbc</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
5	<p><b><u>Recruitment and Appointment of Staff</u></b></p> <p>Results of recruitment test checking on a sample of CSS employees were mostly satisfactory, however there were a few examples where insufficient evidence was presented to confirm identity and DBS checks were undertaken.</p> <p>The auditor received details of all CSS agency transactions in the 2019/2020 financial year. It was found that a number of transactions were not processed through the corporate process i.e. Matrix.</p> <p>Review of the CSS establishment list revealed there are currently 271 posts. 47 posts were vacant and 113 were casual. There were a number of employees who had multiple posts, this included centre managers. There is the potential to review the establishment list to create more generalist Job Descriptions to remove multiple postholders.</p>	<p>Inappropriate or unqualified staff may be appointed.</p> <p>Establishment posts may not be required.</p>	<p></p> <p></p>	<p>DBS requirements are set corporately and undertaken by MHR.</p> <p>Centre Support and Policy Manager has spent many hours in trying to secure staff via matrix. At the point of doing the audit it had come to light that matrix had failed to process 40 daily Catering Assistant positions which required many hours to review through CSS to ensure payment could be actioned. Matrix has been unable to secure staff and we are pleased to report we have now concluded an extensive recruitment process for our own casual staff. It is unlikely we will call on matrix again as they have not been able to secure catering staff.</p> <p>On 18 Feb the HR lead sent Head of CSS an establishment list to check. A full review took 3 days proposed deleting 40 posts, then a follow up meeting took place between</p>

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	<p>The auditor identified 94 posts in the CSS establishment where no payments were made in the year 2019/2020.</p> <p>Discussions with the Head of Finance established there was a reluctance to use the CSS establishment list for budgeting purposes as Finance were not confident in the information contained within the list. In addition, because of the mixed nature and multiplicity of roles and grades there were instances where payments to staff were incorrect, delayed and placed avoidable administrative burdens on staff in CSS and Finance. Rationalising the establishment list would help to remove administration and reduce potential errors.</p> <p><b><u>DBS Procedures</u></b></p> <p>DBS checks that are required upon designated CSS posts are an essential element of the recruitment process and form part of the pre-employment checks required. These checks are undertaken for</p>	<p>Inaccurate establishment list may impair management decision making.</p> <p>Inaccurate DBS levels accorded to posts from DBS checks may be illegal if they are not correct and if they do not comply with external and Council requirements.</p>	<p></p> <p></p>	<p>the officers and Head of CSS is waiting on an updated list as to whether there is the opportunity for further review.</p> <p>As stated 40 posts have been deleted</p> <p>We have had to have some posts on the system should the need arise in the future, but this has only needed to be implemented if no other option available eg a centre manager having a caretaker role if no caretaker role can be found. Opportunity to review areas and pay over time but this only works if this a high level of pay for the role undertaken.</p>
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<p>the Council by an outsourced provider and the service is notified of the DBS level accorded to the post.</p> <p>In discussion and from audit enquiries made audit was informed that the DBS level granted to individual CSS posts can mean that a difference arises between that result and the expectation and /view held by the service of the DBS level to be accorded.</p> <p>Internal audit noted that the DBS service carried out a review of DBS procedures across the Council in 2019 and this raised findings with particular regard to the classification of some CSS volunteers.</p> <p>Audit notes that corporate DBS training and consultancy has been arranged through NACRO for the near future that has been made available to Heads of Service and key managers.</p>			<p>Immediately prior to Covid-19 there had been a query concerning Community alarm positions which have always received enhanced checks but have more latterly been proposed that they should not be enhanced checked in the future. Head of CSS working with HR lead sought advice from NARCO in February and we received confirmation that these posts should be enhanced.</p> <p>Voluntary Sector Managers feedback ” It is acknowledged that since the audit all Volunteers are being checked at the enhanced level but not barred and there was one volunteer yoga tutor that resulted in requesting the wrong level of DBS check, this is noted and won’t happen again and it was one volunteer”.</p> <p>Community Transport services will hold a secondary DBS record check to MHR on</p>
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			<p>their CATSS system, which will remind transport to request renewal from MHR if this has not been actioned. The main responsibility of DBS issue and renewal, including sign up to direct debit renewal service lies with MHR of which CSS pays a fee.</p> <p>As previously stated Head of CSS has sought consultancy advice on the query with respect to all Community Alarm staff and have confirmation of the requirement. All CSS managers would have attended the NACRO course however this had to be cancelled due to Covid-19.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Head of CSS and Community Transport Manager</b></p>	<p><b>Target Implementation Date</b></p> <p><b>31.08.20</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
6	<p><b><u>Staff Supervision and Training</u></b></p> <p>The auditor requested records of training undertaken by CSS staff members. The records for several areas in CSS were available and were found to be satisfactory. There were however a number of areas where the auditor could not confirm staff members had completed the required training.</p> <p>A review of the mandatory Safeguarding e-learning training course records showed that 43 CSS staff members were not</p>	<p>In the event of an incident investigation the council may not be able to demonstrate staff members involved were suitably trained.</p> <p>Council policy relating to mandatory training may not be complied with.</p>	<p></p> <p></p> <p></p> <p></p>	<p>We are currently reviewing CSS training programme capturing exactly what training each staff member has done and what would be the bespoke CSS training offer coming out of Covid-19. We have received an updated e-learning training record and are reviewing as to how we develop a 2 monthly Centre training programme to support front line staff to action the key Council mandatory training areas eg safeguarding, information governance, lone worker etc.</p> <p>The new CSS administrator has completed a training questionnaire with Centres and transport. We want to also ensure that all training records are updated and maintained and that we have a clear documented training programme. We had to cancel a range of training due to Covid-19 but have started discussions with trainers to look at reinstating training before the Centres open. The cancelled courses being reinstated include professional boundaries programmes and seated dance for Centres. We were looking to action Centre based safeguarding training and first aid by the end</p>

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<p>Safeguarding certified.</p> <p>The auditor reviewed IG mandatory training records for 2018/2019 and 2019/2020. From a total of 33 CSS employees, it was found that 23 (70%) had no record of attendance at mandatory IG training.</p> <p>The auditor was unable to establish whether there are requirements attached to the role of transport services driver e.g. periodically to provide evidence they are medically fit to operate council vehicles. In addition, whether transport services drivers are required to undertake first aid, lone working, fire extinguisher training.</p> <p>12 CSS managers were requested to provide written assurance of performance management reviews (appraisals) for their staff. Responses were received from 10 managers. Two managers failed to respond. (DC Visiting and Information Support Officer and DV Centre Manager)</p>	<p>CSS staff member may be the cause of an information incident.</p> <p>Untrained staff may not be able to assist in an emergency.</p> <p>Staff training needs may not be identified.</p>		<p>of July If trainers are available.</p> <p>See above. Safeguarding sessions will be an integral part of the CSS training offer.</p> <p>See above. We will be considering what current modules of IG training be zoom or appropriate method.</p> <p>Transport Manager feedback “As the new Community Transport and Fleet manager this is one of her immediate work programmes to look at actioning site and medical checks. Other areas of training will be part of CSS training programme detailed above”</p> <p>It is appreciated 2 were not returned. It is believed there was some confusion asking for the Visiting and Information Support Officer appraisal as this role no longer exists and the officer concerned is now the Weybridge Centre Manager. Head of CSS can confirm that appraisals have taken place with all Centre Managers and managers are currently concluding this year’s appraisals.</p>
<p><b>Responsible Officer:</b></p>	<p><b>Head of CSS (working with new Administrator)</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>31 August 2020</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
7	<p><b><u>Security of Assets</u></b></p> <p>The auditor obtained a list of motor vehicle plant and equipment assets held by Community Support Services. When the list was compared with the insurance schedule a number of discrepancies were identified where vehicles appeared on one schedule and not the other. e.g. further investigation revealed vehicles were sold.</p> <ul style="list-style-type: none"> <li>• <b>Vehicle licence # [REDACTED]</b> appeared on the asset register and the insured list. Further enquiry established that the vehicle was sold earlier in 2019/2020. It should be deleted from the asset register and the appropriate adjustment made to the accounts of the council.</li> <li>• <b>Vehicle licence # [REDACTED]</b> is listed on both asset register and insurance schedule. The auditor was informed this vehicle was sold.</li> <li>• <b>Vehicle licence # [REDACTED]</b> does not appear on the asset register but is on the insurance schedule. Further enquiry established that this was a recently purchased vehicle (November</li> </ul>	<p>Asset register and accounting records may be inaccurate.</p>		<p>The new CT manager has updated the asset register.</p>

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	<p>2019) from Trekker Bus.</p> <p>Managers of vehicles where drivers are allowed to take them home were requested to confirm the business case for this practice. The explanations were reasonable, and the HOS had given approval.</p> <ul style="list-style-type: none"> <li>• Community Alarms – Claygate Centre (2 vehicles, the drivers allowed to take vehicles home)</li> <li>• Property Maintenance – (1 vehicle the driver is allowed to take the vehicle home).</li> </ul> <p>However, there could be tax implications for either the council or the employee as there may be a benefit in kind.</p> <p>Advice from Finance is that employees should declare in writing they would not exploit the vehicles for private use.</p>	<p>HMRC benefit in kind rules may be contravened. The council or the employee may be penalised if rules are found to be broken.</p>		<p>Head of CSS is requesting the re-introduction of an email confirming that the staff solely use their vehicle for work purposes.</p> <p>Head of CSS is seeking guidance on how we re-introduce this yearly email which was last actioned by the Elmbridge Payroll Officer so a new process will to be established and logged by CSS</p> <p>The 3 vehicles referred to with respect to Community Alarm and property maintenance have been operating in this way for several years. Due to potential emergency requirements on both services out of core operating hours this has been recognised as the most appropriate way of functioning.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Head of CSS</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>30 July 2020</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
8	<p><b><u>Social Funds</u></b></p> <p>The arrangement for social funds were reviewed at Claygate and Cobham.</p> <p>At Claygate it was established two funds exist i.e.</p> <ul style="list-style-type: none"> <li>• <b>Friends of Claygate Centre</b>, which is a charity whose funds are managed autonomously by an external treasurer.</li> <li>• <b>Managers Social Fund</b>, which is managed by the Centre Manager, funds are accounted for by way of a general ledger code (BGZ30/T51) in the EBC accounts i.e. funds received are lodged to the councils general bank account and payments are disbursed from the same account. Expenditure decisions are made at the discretion of the Centre Manager.</li> </ul> <p>On occasion donations are received but there is no stipulation as to which of the two funds the donation should go to. The manager explained that on these occasions the fund is split between the two funds.</p>	<p>Donations to social funds may be incorrectly accounted for.</p>	<p></p>	<p>Given that the social funds arise out of fundraising activity by the managers and allows them to carry out an activity programme where there is no budget H of CSS would fully support managers being best placed, if a donation is not stipulated to</p>

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	<p>At Cobham there is one social fund account. i.e.</p> <p>The Managers Social Fund. The manager indicated management of the fund was at his discretion. Guidance should be in place to ensure that all funds held in trust are managed with transparency and funds are treated to a consistent level across all centres.</p> <p>In discussion with the manager he indicated that up until recently, records were not maintained of Social Fund transactions. Initially the manager was unaware of the social fund spreadsheet, or having to keep receipts for social fund purchases, however since mid – January he has started keeping records and will do so going forward.</p> <p>There are extensive notes in the Daily Operation Manuals covering the activities of the Managers Social Fund. However, the notes do not provide details of how transactions of the fund should be recorded and what evidence should be retained to support them.</p>	<p>If discretionary procedures are allowed to operate there may be no documentary evidence to support transactions.</p> <p>Documented procedures may not be representative of current Social Fund activities. Users of procedure documents may lack guidance on the treatment of transactions.</p>	<p> <b>A</b></p> <p> <b>G</b></p>	<p>determine where it should be banked and on occasion split between both funds.</p> <p>In terms of Cobham social fund, there was a review that took place just before the audit commenced and it became clear that Cobham was not recording in the same way as other Centres. This was rectified in Jan/Feb.</p> <p>The opportunity will now be taken to produce some guidelines going forward as we have two new Centre Managers coming into post. It must be acknowledged that there is no Centre activity fund and Centre Managers work really hard with a wide range of fundraising activity which allows their activity programmes to operate which is as no cost to the Council. We will ensure social fund processes and procedures are included in the operational manual.</p>
<p><b>Responsible Officer:</b></p>	<p><b>Centre Support and Policy Manager</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>31 August 2020</b></p>	

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
9	<p><b><u>Transport Services</u></b></p> <p>Review of Transport Services revealed there is no evidence performance of the operations was routinely monitored or measured for its effectiveness. The information systems used in the service are capable of providing data to enable scrutiny of performance however these are underutilised.</p> <p>Through observation the auditor was able to confirm that procedures, guidelines, instructions and templates existed for a number of transport processes. These were retained on the Transport Services G drive. Most of these documents were 1 to 2 pages in length. Given that not all drivers</p>	<p>Poor performance may not be detected.</p> <p>If drivers are unaware of procedures, they cannot be expected to comply with them.</p>	<p> A</p> <p> A</p> <p> R</p>	<p>At the time that the audit was undertaken there was no CT manager in post. CT manager feedback “I am reviewing all aspects of the service which include reviewing the reports and opportunities that our CATSS operating system provides. The reality is that all existing requirements are being maintained but we will be coming out of Covid and look at other service opportunities for the future. We are also considering the option of linking a driver per Centres with that as their work base to provide flexible support if required. I will be producing monthly passenger figures and numbers according to centre and activity. Including implementing a quality assurance programme where transport management staff go out on the bus with the driver to review working practices and safety inspections.”</p> <p>The transport manager will also implement additional KPI’s for the service quarterly.</p> <p>“I am currently reviewing and updating the CT handbook which is a printed book given</p>

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<p>have access to the EBC network it is unclear how they are able to access procedures.</p> <p>It was found there were a number of vehicles listed on the insurance schedule which did not appear in the CATTs operational list used to monitor servicing and inspection requirements CSS vehicles. i.e.</p> <ul style="list-style-type: none"><li>• [REDACTED], (189) <b>(Sold)</b></li><li>• [REDACTED], (194) <b>(Inactive)</b></li><li>• [REDACTED], (196) <b>(Inactive)</b></li><li>• [REDACTED], (Former pest control vehicle) <b>(Sold)</b></li><li>• [REDACTED], (Property Maintenance vehicle) <b>(handy man)</b>.</li><li>• [REDACTED], <b>(Community Alarms vehicle)</b></li><li>• [REDACTED], (Citron Nemo Enterprise). <b>(Community Alarms)</b>.</li></ul> <p>Discussion with managers of vehicles held away from the depot e.g. Community Alarms revealed a lack of clarity on who was responsible for overseeing maintenance and who has inspection responsibilities for those vehicles. An incident was cited of a vehicle driving</p>	<p>Vehicles may be unsafe to operate if they are not inspected and serviced.</p>	<p></p>	<p>to drivers as they do not have access to electronic systems. The transport operational handbook will be updated and re-issued and allocated per bus. Discussions are also being undertaken with regards to updating and implementing the councils overriding transport policy. With attention to driver medicals and driving license checks”.</p> <p>A full review has already been undertaken by the CT manager of the vehicle fleet. There was some failure in recording when two vehicles were sold previously but the processes are now clearly in place going forward. All vehicle fleet assigned to community transport are now fully recorded on CATSS. Transport are co-ordinating with insurance and finance to ascertain full fleet allocation for the council and ensuring all records match.</p>
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<p>around without road tax which resulted in the manager concerned arranging mot's, servicing and repairs for the vehicles they were managing.</p> <p>The auditor was provided with the inspection and maintenance schedule extracted from CATTs information system as at the 30.01.2019. For those vehicles which were listed it was found that First Aid Kits were overdue to be serviced since November 2019.</p> <p>The auditor was able to confirm a vehicle tracking system (RAM) was in operation at Transport Services (TS). Testing revealed a vehicle which was sold (██████████) still had an EBC tracker unit attached to it this was registering on the EBC tracking system (RAM).</p> <p>The auditor reviewed a recent fuel invoice tendered by All Star (fuel card operators) the following was noted The TS acting manager (Senior Scheduling Officer) does not review the invoice before it is approved for payment by the Head of CSS. Audit opinion is that lack of review at the operational level has resulted in a number of inaccuracies remaining unidentified e.g.</p>	<p>First aid kits may be defective.</p> <p>Vehicle use may not be monitored.</p> <p>Discrepancies may not be identified.</p>	<p></p> <p></p> <p></p>	<p>“A meeting is taking place between the CT Manager and the Community Alarm manager to review roles and responsibilities going forward. Community Alarm vehicles are now re-assigned to CATSS and follow the same procedure of tax/servicing/maintenance as community services fleet as has been the situation previously”</p> <p>New First aid kits were ordered earlier in the year and have all been issued. It is confirmed that all vehicles have appropriate supplies. Currently highlighting St John’s ambulance guidance with respect to actioning first aid during Covid.</p>
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	<p>Review of the January 2020 invoice revealed number of transactions where the costs for other services were not recharged. Changes in vehicles were not notified to the officer processing the invoice for payment, therefore the cost allocation template for charging out fuel costs was outdated.</p> <p>Two vehicles were recorded refueling with premium diesel which is higher cost than the regular diesel fuel normally purchased.</p>	<p>CSS may be incorrectly paying for fuel used by other council service vehicles.</p> <p>The cost of fuel may be excessive.</p>		<p>As previously acknowledged we have not CT manager in place at the time of audit. Management support provided by 3 other managers during this period was focused on ensuring the responsiveness of the day to day operation which was achieved but the monitoring and testing capacity of the RAM system is something that the manager will review after Covid.</p> <p>Two officers were providing management support over this period and due to the transport situation, the admin officer was taking on more of the production aspect of invoices due to the staffing situation. Review of all invoices is the responsibility of the Manager and this is now actioning. This related to one driver who had understood there was a requirement to use the premium diesel to ensure the vehicle ran appropriately. It was immediately explained that this was not a requirement, and this is no longer taking place.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Community Transport Manager</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>31 August 2020</b></p>

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Ref	Finding	Potential Risk Implication	Priority	Agreed Action
10	<p><b><u>Meals on Wheels</u></b></p> <p>Meals and wheels testing was undertaken at the Molesey Centre.</p> <p>The auditor established there were no inventory records documenting the movement of provisions in the preparation of meals. Annual stocktaking was discontinued two years ago.</p> <p>Audit examination of MOW procedures indicated they were outdated and required to be reviewed.</p> <p><b><u>Alcohol Licensing</u></b></p> <p>From audit enquiries at Cobham and Molesey Centres, it was established that alcohol is held on the premises and is sold mainly for events held on the premises.</p> <p>Audit enquiries found that although Premises Licenses are in existence the Designated Premises Supervisor (DPS)</p>	<p>Stock stolen or damaged may go undetected.</p> <p>Procedures document may not reflect the current activities of the MOW operations.</p>	<p> A</p> <p> G</p>	<p>It was the requirement the past for an annual inventory to be undertaken. A review will take place with finance to see if it should be re-introduced and we were told previously this was no longer required. We will re-implement the annual stock take if required but it was felt that this in itself was no longer an appropriate use of time.</p> <p>We have a new administrator who joined us in April and is undertaking a review of a range of issues across Centres to include supporting the manager with a policy and procedure review. The review had not taken place due to staff sickness, however seeking to action in the next 6 weeks. Just appointed 2 new Centre Managers so currently only have 1 Manager vacancy and our focus has been on maintaining our high level of activity due to Covid-19.</p> <p>Four managers have undertaking the licencing course in the last year, however 2</p>

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	<p>named on the licenses is incorrect and outdated and the persons named on the licenses may no longer be based at the establishment.</p>	<p>Premises licences held may not be valid if the DPS stated on the license is incorrect.</p>		<p>of those managers have now left and there will be a requirement for the new managers to undertake the licence course now. Currently making enquiries as to when the courses are likely to resume. The two managers who took the course in the last year are completing a registration process with their Council's where they reside. One being Elmbridge and one being Woking. Seeking to find appropriate way forward currently to overcome changed services due to Covid-19.</p> <p>All training had been undertaken for Centre managers in terms of licence requirements. Following this they needed to register with their local Councils and on a couple of occasions this did not take place and will be followed by after Covid-19.</p>
<p><b>Responsible Officer:</b></p>		<p><b>Head of CSS and Centre Support and Policy Manager, Molesey, Walton, Weybridge, Cobham Managers reference licensing.</b></p>	<p><b>Target Implementation Date</b></p>	<p><b>31 August 2020 (this may be delayed if courses have not re-commenced)</b></p>

### **Summary from Head of Service**

As we come out of Covid-19, a wide range of actions have already commenced. A review meeting taken place with officers with respect to Centre/Transport actions. This report was further updated because of these meetings and Appendix A added to highlight actions and timelines. We have robust implementation dates seeking to action by the end of August, unless the implications of Covid-19 prevents us doing this. The update paperwork as detailed in the report. It must be acknowledged that have been without a Senior Centre Manager for 20 months. However, we successfully recruited an administrator in May and considerable work has already taken place on training, procurement, capital spend projects and pelican review since then. This post will be invaluable in terms of support the policy manager reviewing procedures and supporting the Centre Managers.

It is fair to say that the ethos across Centre's have been that Managers give many hours over and above their core hours, engage in fundraising activity to sustain services and rely on volunteers manning the tea bars. However, the Managers and I, have total confidence in the volunteers and any mistake in banking would be a genuine error. We could mitigate risk by introducing paid staff in all the coffee shops and a robust activity fund for all activity which would negate the need for fundraising however it feels like our way of operating has been a unique element of Centre success and community engagement in these Centre's. It is accepted there will always be a potential risk when relying on good will, I have complete confidence in the Centre management team. The Centre Manager is the only full-time member of staff with part time admin support. We are balancing the delivery of front-line services against the staffing resource available.

With respect to Transport, a new Manager joined in April and has been actively reviewing all aspects of service.

The total focus of the team currently is on delivering the Covid-19 offer as well as looking at recovery plans and how this will impact on our Centre's, Meals on Wheels and Centre operation. Head of CSS has produced an activity plan as appropriate coming out of this report focusing on training and reviews as appropriate. We have already actioned a significant number of required areas/ reviews and will continue to work with colleagues to move forward acknowledging that the whole team is giving considerable number of hours over and above their core hours currently to maintain 1,500 Meals on Wheels a week and 2,000 welfare calls. Also, very mindful there will be a focus of bringing shielded call work activity into Community Support Services which I am currently seeking to action, but this presents a range of challenges. There is a total commitment to action accordingly. Appendix A details our actions and timescales and highlights more detailed reviews that have taken place.