



INTERNAL AUDIT FOLLOW UP OF RECOMMENDATIONS REPORT

Brentwood Borough Council

July 2022

IDEAS | PEOPLE | TRUST



Summary

We have followed up on the status of those High (H) and Medium (M) recommendations due for implementation by 30 June 2022. The position as at 27 June 2022 is summarised below:

	Total	Complete		In Progress		Overdue		Superseded		Not Due		% H & M Recs Completed / Superseded
	H & M	H	M	H	M	H	M	H	M	H	M	
	Recs											
2021/22												
Partnerships	2										2	0%
Risk management	3	-	-	-	-	-	-	-	-	-	3	0%
Main financial systems	2									-	2	0%
Financial planning and monitoring	-	-	-	-	-	-	-	-	-	-	-	n/a
Capital projects	1	-	-	-	-	-	-	-	-	-	1	0%
Building control	2	-	-	-	-	-	-	-	-	-	2	0%
Homelessness	3	-	2	-	1	-	-	-	-	-	-	67%
Planning	3	-	-	-	3	-	-	-	-	-	-	0%
IT Data Breaches	4	-	2	-	2	-	-	-	-	-	-	50%
Local Development Plan	-	-	-	-	-	-	-	-	-	-	-	n/a
C-19 Grants Expenditure	2	-	2	-	-	-	-	-	-	-	-	100%
2020/21												
Risk Management	2	-	2	-	-	-	-	-	-	-	-	100%
Main Financial Systems	5	-	5	-	-	-	-	-	-	-	-	100%
Licensing	6	-	-	-	-	-	-	-	-	2	4	0%
Procurement & Contract Management	4	-	3	-	1	-	-	-	-	-	-	75%
Cyber security	3	-	2	-	-	-	1	-	-	-	-	67%
Street cleaning, Fly Tipping & Enforcement	6	-	-	1	2	1	-	-	-	-	2	0%
Disaster Recovery & Business Continuity	1	-	-	-	1	-	-	-	-	-	-	0%
Performance Management & Formal Complaints	1	-	1	-	-	-	-	-	-	-	-	100%
Sickness Absence	5	1	4	-	-	-	-	-	-	-	-	100%
Corporate Strategy	3	-	2	-	-	-	1	-	-	-	-	67%
Fraud risk assessment	13	1	12	-	-	-	-	-	-	-	-	100%
2019/20												
Risk Management	3	-	3	-	-	-	-	-	-	-	-	100%
Main Financial Systems	3	-	3	-	-	-	-	-	-	-	-	100%
Treasury Management	2	-	2	-	-	-	-	-	-	-	-	100%
Housing Repairs and Maintenance	1	-	1	-	-	-	-	-	-	-	-	100%
Leisure Services	2	-	2	-	-	-	-	-	-	-	-	100%
Housing Benefits	3	-	3	-	-	-	-	-	-	-	-	100%
Food Safety	1	-	1	-	-	-	-	-	-	-	-	100%
Trade Waste	1	-	-	-	-	-	1	-	-	-	-	0%
HR Recruitment	1	-	1	-	-	-	-	-	-	-	-	100%
2018/19												
Workforce Strategy	2	-	2	-	-	-	-	-	-	-	-	100%
Housing Department	2	1	1	-	-	-	-	-	-	-	-	100%
Main Financial Systems	6	-	6	-	-	-	-	-	-	-	-	100%
Housing - Homelessness	2	1	1	-	-	-	-	-	-	-	-	100%
GDPR Compliance	1	-	1	-	-	-	-	-	-	-	-	100%
Disaster Recovery and Business Continuity	3	-	3	-	-	-	-	-	-	-	-	100%
Local Development Plan	2	-	2	-	-	-	-	-	-	-	-	100%
Corporate Projects	3	-	3	-	-	-	-	-	-	-	-	100%
PCI/DSS Compliance	5	1	3	-	-	-	1	-	-	-	-	80%
2017/18 and c/f from 2016/17												
All audits	80	14	66	-	-	-	-	-	-	-	-	100%
	194	19	141	1	10	1	4	-	-	2	16	

Total BDO Recommendations

Of the total 194 recommendations (relating to 2017/18 to 2021/22), 176 were due to be implemented by 30 June 2022. We have confirmed with reference to evidence that 160 have been completed/closed. Two high priority recommendations are outstanding (1 overdue and 1 progress) and there are 2 not yet due.

2021/22 Recommendations

Of the 22 recommendations raised in 2021/22, 6 have been completed, 6 are in progress and 10 are not yet due.

2020/21 Recommendations

Of the 49 recommendations raised in 2020/21, 33 have been completed, 5 are in progress, 3 are overdue and 8 are not yet due. The not yet due recommendations include 6 Licensing recommendations (2 of which are high priority) which will be followed up by a further audit of the area (including sample testing) as part of the 2022/23 internal audit plan.

2019/20 Recommendations

Of the 17 recommendations raised in 2019/20, 16 have been completed and 1 is overdue.

2018/19 Recommendations

Of the 26 recommendations raised in 2018/19, 25 have been completed and 1 is overdue.

2016/17 and 2017/18 Recommendations

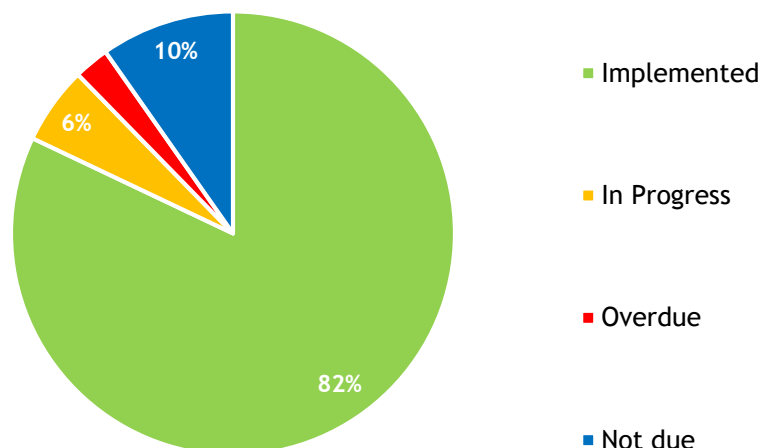
Of the 80 recommendations raised in 2016/17 and 2017/18, all have been closed.

Those which are overdue have surpassed both the original implementation date and the revised implementation dates more than once or no update has been received from officers.

Recommendations not completed will be followed up again ahead of the next Audit and Scrutiny Committee, along with other recommendations due.

Where recommendations are in progress, more information on the current status is provided in the pages that follow. This includes those recommendations where management has advised us that the recommendation has been implemented but evidence has yet to be received to enable internal audit to confirm this.

Status of 2017/18 to 2020/21 Recommendations



Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2018/19 - PCI/DSS Compliance				
<p>18/19 PCI/DSS rec 5:</p> <p>A policy should be developed, which sets out how the Council will manage PCI DSS compliance activities and the policy should be reviewed on a regular basis. The policy should include but not be limited to:</p> <ul style="list-style-type: none"> • Assignment of roles and responsibilities for ensuring that the Council is PCI DSS compliant have been assigned • Procedures for staff that are responsible for taking card payments • The Council's security strategy in relation to the storage, processing and transmission of credit card data • A set of instructions for detecting, responding to and limiting the effects of an information security event. The Council should develop and disseminate suitable procedure notes for staff, to ensure that working practices are compliant. Appropriate training should be provided on PCI DSS requirements to all members of staff dealing with card payments. 	Medium	Tim Huggins (ICT Manager)	<p>September 2019</p> <p>June 2020</p> <p>September 2020</p> <p>October 2020</p> <p>December 2020</p> <p>March 2021</p> <p>August 2021</p> <p>October 2021</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>The policy has been developed.</p> <p>Storage of data in within the information security policies and management of data is part of the GDPR training.</p> <p>The Council is trying to find correct training material for this training.</p> <p><u>Internal audit comment:</u></p> <p>Internal Audit was previously satisfied from review of the policy dated November 2019 that these elements have been included. However, recommendation kept open until training has been provided.</p>
2019/20 - Trade Waste				
<p>19/20 TW rec 1:</p> <p>a) Actively search and identify possible opportunities/events available to promote the trade waste service, ensuring that the market audience is understood prior to attending events to ensure they are aligned with the service's target market.</p> <p>b) Liaise with the business rates team to ensure that trade waste leaflets with fee information are distributed as part of the annual business rates information packs.</p>	Medium	Mike Dun (Trade Waste Officer)	<p>a) March 2020</p> <p>March 2021</p> <p>September 2022</p> <p>b) October 2019</p> <p>February 2020</p> <p>Closed</p> <p>c) October 2019</p>	<p><u>Previous management update:</u></p> <p>Parts a) and d): Although these would have been something we would have liked to undertake, since the pandemic we have had to focus on keeping our existing customers' needs met. We have had to adjust contracts continually as businesses have closed and opened on various occasions. This has consumed a large amount of admin time. We will be looking to promote additional contracts but this</p>

Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
<p>c) Liaise with the food safety team to identify new businesses that may require trade waste services.</p> <p>d) Undertake cold-calling of local businesses in the borough to attract new customers.</p>			<p>February 2020</p> <p>Closed</p> <p>d) Ongoing</p> <p>31 March 2021</p> <p>March 2022</p> <p>September 2022</p>	<p>is on hold until we manage to get our current data base correct for the April 2022 renewal.</p> <p>b) A leaflet was drawn up that promotes the services of the Business Waste Team and was delivered in March along with the NDR demand to all businesses in Brentwood.</p> <p>c) Staff issues and the adverse impact of Corona Virus making this activity difficult at the moment. All efforts going on existing client base to protect it.</p> <p><i>Internal audit comment:</i></p> <p><i>Part b was previously closed following receipt of the leaflet.</i></p> <p><i>Part c was previously closed following confirmation received from the service.</i></p> <p><i>Parts (a) and (d) remain open.</i></p>
2020/21- Cyber Security				
<p>20/21 CSec rec 1:</p> <p>a) The Council should establish a cyber security awareness programme for all staff and implement the approach that is planned to raise awareness for Members and senior management.</p> <p>b) Training completion should be monitored and there should be a record of all the training that has been provided and completed.</p>	Medium	Tim Huggins (ICT Manager)	<p>July 2024</p> <p>October 2024</p> <p>April 2022</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>The Council has partnered with Evalian and is implementing their elearning portal for GDPR/DPA/Info Security training. The Council has signed up to a Phishing Exercises service and will be launching exercises. The Council has also partnered with CM Alliance for further cyber awareness training. SLT and ELT have completed awareness training.</p> <p>Member training will be carried out in September after Summer recess. The training material and trainer have already been organised.</p> <p><i>Internal audit comment:</i></p> <p><i>Recommendation remains open until monitoring of the</i></p>

Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<i>above awareness activity completion can be evidenced and awareness training for members completed.</i>
2020/21 - Corporate Strategy				
20/21 CS rec 3:	Medium			Management update:
a) Management should ensure that the service plans for Corporate Finance, Risk & Insurance and Communications are completed and made available to staff.		Jacqui Van Mellaerts (Director of Corporate Resources)& Steve Summers (Chief Operating officer)	December 2020 August 2021 October 2021 February 2022 April 2022 September 2022	a) The two service plans have now been drafted and are awaiting final business plan priorities to be agreed and approval by the next IG Group meeting.
b) The focus areas and annual targets in service plans should clearly identify and reference to each of the strategic objectives for the year, as relevant to each service.		Tim Huggins (ICT Manager)	January 2021 August 2021 October 2021 Complete	b) The task of matching projects and service plans was undertaken. A new Business plan has been developed and a projects and programmes board formally set up. <i>Internal audit comment:</i> <i>Part (b) previously closed by Internal Audit. Part (a) remains open until we obtain evidence that all service plans have been completed.</i>
2020/21 - Street cleaning, Fly Tipping & Enforcement				
20/21 ENV rec 6:	High	Daniel Cannon (Community Safety & CCTV Manager)	October 2021 February 2022 June 2022 September 2022	Management response:
a) The Environmental Health and Enforcement Team should develop detailed protocols or procedures, providing guidance on their activities and current working practices. The protocols should include their current working arrangements including documentation, response targets and actions, follow up actions, risk profiling, conflict resolution,				Since the audit was undertaken the Council has entered into partnership with NES (National Enforcement Solutions) who are now dealing with all flytipping enforcement cases in the Borough. <i>Internal Audit comment:</i> <i>Recommendation remains open until evidence is received that the new</i>

Recommendations: Overdue

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
<p>the FPN issuing process and cancellations, investigations, evidence retention and training.</p> <p>b) The Environmental Health and Enforcement Team should develop a detailed and combined database incorporating all the incidents raised by the SCT and complaints received from the wider community to ensure all investigations are carried out correctly and to eliminate the possibility of duplication or non-identification. The database should also include complaint resolution dates and action dates to compare performance against the informal five day response targets and 28 days target for cases to be resolved.</p>				<i>arrangement covers the recommended action.</i>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2020/21 - Procurement and Contract Management				
<p>20/21 P&CM rec 3:</p> <p>Evidence to support contract extensions should be organised and stored appropriately so that they are easily retrievable for future use. A senior member of the procurement team should review the documentation for adequacy and completeness.</p>	Medium	Jane Mitchell (Senior Procurement Officer)	<p>January 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>When reviewing the Contracts Register and asked to extend a contract, the Procurement Officer to ask for evidence for the extension.</p> <p>This action is ongoing.</p> <p><u>Internal Audit comment:</u></p> <p>Recommendation remains open.</p>
2021/22 - Homelessness				
<p>21/22 HLN rec 4:</p> <p>The Council should review the KPIs that it reports to SLT as well as the Environment, Enforcement and Housing Committee in respect of homelessness, rough sleeping and temporary accommodation.</p> <p>Consideration should be given to inclusion of the following KPIs:</p> <ul style="list-style-type: none"> • The number of homelessness cases received as a cumulative total in the year and for the month • The number of homelessness cases by case type i.e. prevention, relief, triage and decision • The number of open and closed homelessness cases • % of cases where the 56 day rule has been met • Number of rough sleepers in the borough • Number of referrals made via StreetLink. 	Medium	Angela Abbott (Corporate Manager - Housing Needs and Delivery)	<p>January 2022</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Previous management update:</u></p> <p>A suite of proposed KPIs and Service Standards has been prepared, which includes the recommended KPIs referred to in this report.</p> <p><u>Internal audit comment:</u></p> <p>Recommendation kept open until the KPIs are reported to SLT and Members.</p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
2021/22 - Planning				
<p>21/22 PLN rec 1</p> <p>The Council should ensure that it has clear staff guidance for reviewing and assessing planning applications and that it carries out periodic reviews of the guidance (e.g. annually) to ensure that it remains up to date and reflects the latest requirements. An updated Handbook should continue to cover at a minimum:</p> <ul style="list-style-type: none"> • The role of Councillors and Officers • Planning advice • Declaration of interests in planning applications • Officer reports to Committee • Committee site visits • Lobbying • Public speaking at Committees • Decisions contrary to Officer recommendation/Development Plan • Regular review of planning decisions • Complaints. 	Medium	Caroline Corrigan (Corporate Manager Planning Development Management)	<p>May 2022</p> <p>September 2022</p>	<p><u>Previous management response:</u></p> <p>A handbook would support and guide officers on the procedures that are statutory along with an outline of roles and responsibilities. This would guide new members of staff and serve as a point of reference for when processes change or are updated. Overall this would provide a best practice manual. A number of the items listed above include roles and responsibilities or decisions that are not within the gift of Planning Officers, such as Lobbying or Public Speaking at Committees. For example, as a handbook, guidance on making a decision contrary to officer recommendation or the development plan is a matter for the Committee. Formal complaints are dealt with by a separate Corporate team. This will be noted in the handbook.</p>
<p>21/22 PLN rec 2</p> <p>The Planning team should put in place a Declaration of Interests register to log any conflicts of interest where a Planning Officer has been assigned a planning application from an applicant they have a connection with.</p>	Medium	Caroline Corrigan (Corporate Manager Planning Development Management)	<p>May 2022</p> <p>September 2022</p>	<p><u>Previous management response:</u></p> <p>In principle this is agreed. This will be included in the handbook, and officers will be provided with guidelines on when they should declare an interest.</p>
<p>21/22 PLN rec 3</p> <p>The Council should ensure that the Delegated Decision Report template includes prompts for further detail and clarity with regards to the consultation process, including when site notices and letters were issued, the number of letters issued and subsequent responses.</p>	Medium	Anthony Fletcher (Development Management Admin Manager)	<p>March 2022</p> <p>September 2022</p>	<p><u>Management response:</u></p> <p>The information on the number and date of letters issued / site notice printed (but not displayed) can be extracted from the database, as well as the number of contributors. A summary of the objections / representations is</p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<p>manually added by the officer.</p> <p>We are confirming if this is now set up to pull through automatically from Uniform.</p> <p><i>Internal audit comment:</i></p> <p>Recommendation kept open until completion can be evidenced.</p>
2020/21 - Street cleaning, Fly Tipping & Enforcement				
<p>20/21 ENV rec 1:</p> <p>Performance standards and KPIs should be agreed as part of the service review and reviewed annually to ensure they reflect any changing business and service needs. The KPIs should be monitored on a monthly basis to ensure the Council is operating in compliance with the requirements of the revised CoP service standards and response times. Performance against the KPIs should be regularly reported to the Environmental, Enforcement and Housing Committee.</p>	High	Darren Laver (Operations Manager)	<p>December 2021</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>Monitoring is currently undertaken on an infrequent basis. The Service however recognises the need to measure its performance. It has employed two supervisors, who are undertaking site visits on a daily basis. The document on a basic form who and where they visit but at this stage they are not undertaking KPI inspections and recording.</p> <p><i>Internal audit comment:</i></p> <p>Recommendation remains open until KPI reporting is in place.</p>
<p>20/21 ENV rec 2:</p> <p>The SCT should complete the N195 categorisation exercise identifying all the land they manage and reclassify them in the intensity of use zones as required by the revised CoP.</p> <p>Supporting the database, a detailed annual work plan should be developed identifying all the land reclassified in the CoP zones, related cleansing activities and appropriate frequencies and timeframes should be allocated, depending on the response times required by the CoP and the resources available to the SCT.</p>	Medium	Darren Laver (Operations Manager)	<p>December 2021</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>The grounds cutting routes have been changed to follow a ward cycle for cutting. Litter picking is still to be completed. These new routes are to be implemented by the end of June 2022 and should reduce the cutting cycle to 3 weeks, which would be a great improvement to current levels.</p> <p>When these have bedded in, the Council will introduce the litter picking schedules with COP zoning to allow inspections and</p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<p>monitoring to be implemented.</p> <p><i>Internal audit comment:</i></p> <p><i>Recommendation remains open until the process is complete.</i></p>
<p>20/21 ENV rec 4:</p> <p>A formal tracker should be maintained, including all mitigating actions raised as part of risk assessments, actions risk rated, allocated owners and fixed timeframes for implementation. Actions should be subsequently monitored with their status recorded to confirm implementation and sufficient formal supporting evidence retained. An explanation should be documented for any delays to the implementation timeframes.</p> <p>Formal reports should be presented at Depot Health and Safety meetings to state the number of actions due, broken down into those outstanding and those that have been implemented within the required period.</p>	Medium	David Wellings (Corporate Health & Safety Advisor)	<p>December 2021</p> <p>September 2022</p>	<p><u>Previous management update:</u></p> <p>Actions have been progressed to identify why mitigating actions, (known on the Council's H&S risk assessments as 'State the additional control measures') were being raised in the first place and as part of this audit action. It was found to be a partial misunderstanding by certain managers misinterpreting the reason for inserting the 'mitigating action' in the wrong column, rather than the correct column of 'Existing Controls' (what we are currently doing to manage the risk).</p> <p>In addressing this audit action and taking into consideration the points raised about monitoring the actions, a revised risk assessment template has been produced to address these points. This is currently being populated with the first revised risk assessment which involves working with managers to ensure the actions are allocated in the correct columns, as well as identifying any 'additional control measures' / mitigating actions, that need to be addressed and the timeframe for this and the person responsible for this action.</p> <p>Further work is also being undertaken to record the further actions/ mitigating actions, as an action tracker, and their implementation through</p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<p>an excel spreadsheet which needs to be set up to monitor the further actions and their completion. This will be completed and shared with the Depot H&S meetings and respective managers as the service moves forward with the revised use and implementation of the new risk assessment format.</p> <p><i>Internal audit comment:</i></p> <p><i>First part of the recommendation previously closed by Internal Audit following receipt of an example of how the revised risk assessment tool is being completed. The recommendation will be closed in full once reporting to the Depot Health and Safety meetings take place.</i></p>
2020/21 - Disaster Recovery and Business Continuity				
<p>20/21 DRBC rec 1:</p> <p>Management should perform a training needs analysis to identify and assess the level and type of training required by all members of staff with regards to business continuity and disaster recovery and should develop a mandatory training programme that is based upon these requirements. Training delivery methods could include, but not be limited to, the exercise types suggested in Appendix I in our report. Attendance should be recorded and monitored and training records should be maintained for audit purposes.</p> <p>Furthermore, Management should conduct a formally documented test of its business continuity and disaster recovery arrangements and should put arrangements in place to test them on a routine basis or following a significant change to the Council's operations. The results of the tests should be</p>	Medium	Sue White, (Risk and Insurance Officer)	<p>October 2021</p> <p>June 2022</p> <p>September 2022</p>	<p>Management update:</p> <p>The training was provided in May 2022.</p> <p><i>Internal audit comment:</i></p> <p><i>First part of the recommendation closed by Internal audit following receipt of evidence of the training provided. However, second part of recommendation regarding a test of business continuity arrangements remains open.</i></p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
reported to Senior Management and any issues identified should be resolved in a timely manner.				
2021/22 - IT Data Breaches				
<p>21/22 ITDB rec 1:</p> <p>a) Management should review and update the Council's Data Protection policy and Data Breach policy to ensure that it remains in compliance with the UK GDPR requirements and they are relevant to the Council's needs and in line with the Council's strategic objectives.</p> <p>b) The Data Breach policy should include detailed procedures for reporting a data breach. This should include but not be limited to:</p> <ul style="list-style-type: none"> o Defining roles and responsibilities o Description of type of personal data breach o Steps taken in case of a breach o Risk assessments and escalations o Containment and recovery o Contact details of the DPO, or other point of contact o Measures taken to evaluate and mitigate any possible breaches o Breach notifications to the ICO o Training and awareness o Monitoring and reporting compliance <p>The revised policies should be approved and communicated to members of staff and arrangements should be put in place for reviewing the policies on an annual basis.</p>	Medium	Tim Huggins (ICT Manager)	<p>January 2022</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>Brentwood Council has gone into partnership with Evalian to support the Council's statutory requirements for Data Protection. As part of this a full gap analysis will be conducted for Data Protection including but not limited to Policies, Processes for Data Protection and Data Breaches. Following this a formal remediation action plan will be developed and actions implemented. This work will support the newly formed Information Governance (IG) Group in their role around information Governance, and the contract will be monitored by the Corporate Manager - IT & Service Improvement.</p> <p>The current Data Breach Policy is available. There is outstanding work to review and update. Due to a large number of subject access requests (SARs), the resources that were arranged for this work have been needed to carry out statutory obligations around the SARs. The Council is looking at how this work can be funded.</p> <p>a) Reviewing of Information Governance policies is part of the role for the IG group and therefore this action will be co-ordinated by the group working with appropriate officers and partners.</p> <p>b) In addition to above - the group will review the recommendations as part</p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<p>of its action plan. Once the suggestions have been reviewed the agreed ones will be included.</p> <p>c) Agreed this is normal practice and will be published in document library and formal communication will be shared with all staff, and also including other IG activities such as training and awareness. Regular reviewing of IG policies is part of the roles and responsibilities of the newly formed IG group and will be undertaken.</p> <p><i>Internal audit comment:</i></p> <p>Recommendation remains open.</p>
<p>21/22 ITDB rec 4:</p> <p>a) The Council should develop an IG training programme, which includes basic IG training for everyone, including new starters, annual refresher training and additional training for key staff groups or roles. Furthermore, training completion should be monitored and there should be a record of all the training that has been provided and completed.</p> <p>b) A comprehensive training needs analysis should be completed and approved by IGG. The training needs analysis should then be annually reviewed and updated against the continuously evolving industry regulations and best practices to ascertain if staff have been appropriately trained.</p>	Medium	Tim Huggins (ICT Manager)	<p>December 2021</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Management update:</u></p> <p>a) The Council already has embedded processes for new starters to carry out information governance training before they start. The elearning platform course was developed with another local authority and requires the passing of a short test. If this is not passed access to systems are stopped.</p> <p>The training portal with Evalian has now been commissioned and the Service Improvement is carrying out the first run on the training and quizzes. Once complete on 1 July 2022, if there are no issues, it will be rolled out across the organisation and moved to Business as Usual. The learning portal is Evalian Online Learning.</p> <p>b) Brentwood has gone into partnership with Evalian to support the statutory requirements for Data Protection. Part of this is regular training. Evalian provides a training portal to allow Brentwood</p>

Recommendations: In progress

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				to train, monitor and analyse. and the IG Group will work with Evalian to continue to update the training in line with industry regulations. <i>Internal audit comment:</i> Recommendation remains open.
2021/22 - Homelessness				
<p>21/22 HLN rec 4:</p> <p>The Council should review the KPIs that it reports to SLT as well as the Environment, Enforcement and Housing Committee in respect of homelessness, rough sleeping and temporary accommodation.</p> <p>Consideration should be given to inclusion of the following KPIs:</p> <ul style="list-style-type: none"> • The number of homelessness cases received as a cumulative total in the year and for the month • The number of homelessness cases by case type i.e. prevention, relief, triage and decision • The number of open and closed homelessness cases • % of cases where the 56 day rule has been met • Number of rough sleepers in the borough <p>Number of referrals made via StreetLink.</p>	Medium	Angela Abbott (Corporate Manager - Housing Needs and Delivery)	<p>January 2022</p> <p>June 2022</p> <p>September 2022</p>	<p><u>Previous management update:</u></p> <p>A suite of proposed KPIs and Service Standards has been prepared, which includes the recommended KPIs referred to in this report.</p> <p><i>Internal audit comment:</i></p> <p>Recommendation kept open until the KPIs are reported to SLT and Members.</p>

Recommendations: Closed in Quarter

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
<p>20/21 RMT rec 1</p> <p>The Council should review the risk management e-learning training completion listing to identify those staff and members who are more closely involved in risk management based on their roles, and ensure that the mandatory online training is at least completed by those individuals where not already done.</p>	Medium	Sue White (Risk and Insurance Officer)	December 2021 Closed	<p><u>Previous management response:</u></p> <p>Agreed recommendation can be carried out and more targeted training will be a useful approach.</p> <p><u>Internal audit comment:</u></p> <p><i>This recommendation is replaced by a new recommendation arising from the 2021/22 audit.</i></p>
<p>20/21 RMT rec 3</p> <p>a) The Risk and Insurance Officer should monitor the use of the new format risk register to ensure that all risks are adequately defined and that updates against each risk are sufficiently detailed, with justifications provided for scores that have not changed (as well as those that have changed).</p> <p>b) Where risk scores have remained at very high or high for several months, officers should consider and challenge the effectiveness of the mitigating actions put in place. The Risk and Insurance Officer should monitor the use of the new format risk register to ensure that all risks are adequately defined and that updates against each risk are sufficiently detailed, with justifications provided for scores that have not changed (as well as those that have changed).</p>	Medium	Sue White (Risk and Insurance Officer) Jacqueline Van Mellaerts (Director of Corporate Resources)	December 2021 Closed	<p><u>Previous management response:</u></p> <p>a) Agreed.</p> <p>b) Risk working group now meets on a bimonthly basis, which reports to Senior Leadership Team. Agreed that officers will continue to challenge using this process.</p> <p><u>Internal audit comment:</u></p> <p><i>This recommendation is replaced by a new recommendation arising from the 2021/22 audit.</i></p>
2020/21 - Procurement and Contract Management				
<p>20/21 P&CM rec 1:</p> <p>a) A training need analysis should be carried out and a training programme for contract management and procurement devised.</p> <p>b) Training in this area should be delivered to relevant members of staff according to their needs and completion of training should be overseen by the Senior Leadership Team.</p>	Medium	Jane Mitchell (Senior Procurement Officer)	<p>June 2021</p> <p>September 2021</p> <p>March 2022</p> <p>Closed</p>	<p><u>Management update:</u></p> <p>Training on contract management and procurement was discussed at a Senior Leadership Team meeting in February 2021. Actions agreed were to repeat a diagnostic of the Council's contract management capability,</p>

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				<p>and then to arrange further training.</p> <p>Contract & Relationship Management Training carried out 11th May and 18th May 2022. Both sessions introduced by Steve Summers, Strategic Director.</p> <p><i>Internal audit comment</i></p> <p><i>Part (a) previously closed by Internal audit following receipt of the diagnostic results. Part (b) closed by Internal Audit following receipt of confirmation that the training has now been provided.</i></p>
<p>20/21 P&CM rec 2:</p> <p>a) A senior member of the procurement team should review contract waiver documentation for current waivers to ensure that correct procedures are being followed and that information contained within the documents is consistent.</p> <p>b) Evidence to support procurement activity should be organised and stored appropriately. A senior member of the procurement team should review procurement files to ensure accuracy and completeness.</p> <p>The Council's procurement policies should be followed for all purchases over £10,000 (the minimum level at which quotations and tender exercises are required).</p>	Medium	Jane Mitchell (Senior Procurement Officer)	<p>June 2024</p> <p>September 2021</p> <p>March 2022</p> <p>Closed</p>	<p><u>Management update:</u></p> <p>a) Waiver threshold reviewed. All Staff email sent noting change in statutory guidance on fairness and transparency in publishing tenders, change in threshold from £10,000 to £25,000 at which a waiver is required, and that all contracts over £25,000 now need to be published on Contracts Finder effectively making them open tenders.</p> <p>b) Training provided to members of staff to improve documentation. The training included version control for contracts and types of records to be kept.</p> <p>c) Training provided to members of staff to improve procurement processes and included discussions</p>

Recommendations: Closed in Quarter

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<p>around new thresholds.</p> <p><u>Internal Audit comment:</u></p> <p><i>Part (a) previously closed by Internal audit following receipt of amended process note to staff. Part (b) closed by Internal Audit following receipt of confirmation that the training has now been provided.</i></p>
<p>20/21 P&CM rec 4:</p> <p>a) Officers should be reminded of the need to send instructions for drawing up contracts on a timely basis and the importance of obtaining signed contracts.</p> <p>b) The finance team should be advised not to release payments to suppliers where a valid contract is not in place.</p>	Medium	Jane Mitchell (Senior Procurement Officer)	<p>September 2021</p> <p>March 2022</p> <p>Closed</p>	<p><u>Management update:</u></p> <p>a) Training provided which included whole procurement cycle, the need to include drafts Ts & Cs in tender and the need for completed contracts.</p> <p>b) The recommendation was not accepted. Contracts do not have to be signed to be legal and do not agree that this would expose the Council to legal proceedings. However, the introduction of no Purchase-no Payment system will ensure that purchase orders are issued to suppliers under BBC terms and conditions.</p> <p><u>Internal Audit comment:</u></p> <p><i>Part (a) closed by Internal Audit following receipt of confirmation that the training has now been provided. Part (b) previously closed by Internal audit following receipt of evidence that No Purchase Order No Pay process has been implemented, as purchase orders carry</i></p>

Recommendations: Closed in Quarter

Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
<i>the Council's terms and conditions.</i>				
2020/21 - Cyber Security				
<p>20/21 CSec rec 2:</p> <p>The draft Cyber Incident Response Plan should be finalised and approved and made available to all relevant members of staff.</p>	Medium	Tim Huggins (ICT Manager)	<p>May 2021</p> <p>August 2021</p> <p>October 2021</p> <p>June 2022</p> <p>Closed</p>	<p><u>Management update:</u></p> <p>A Cyber Incident Response Plan has been developed with some of the supporting documentation - i.e. confidential security playbooks and Threat Actor Library.</p> <p>Hytec are contracted for the Council's Managed Security Service and run the SoC. The OODA (Observe, orient, Decide, Act) loop shows how it integrates with the Council's cyber response.</p> <p>These are dynamic documents that will continue to change to reflect the ever changing landscape.</p> <p><u>Internal audit comment:</u></p> <p><i>Recommendation closed after receipt of the live Cyber, Threat Actor Library and OODA loop.</i></p>
2021/22 - Homelessness				
<p>21/22 HLN rec 2:</p> <p>Where cases are approaching the 56 day limit, the Council should review such cases as a priority to determine the cause of the delay and whether further information is required from the applicant, such that a decision can be made before the 56 day limit. Where cases have not met the 56 day rule, clear notes should be held on file explaining why.</p>	Medium	Marie Gentgall (Housing Options Team Leader)	<p>January 2022</p> <p>June 2022</p> <p>Closed</p>	<p><u>Management update:</u></p> <p>Reports are run via locata on a weekly basis for the Team Leader to manage more easily.</p> <p>The Report shows what date prevention/relief started and how many days left to run before a decision should be made. This report is to highlight cases which are near 56 days as a priority to determine the cause of the delay and whether further information is required from the applicant, and a case review will be undertaken by the Team</p>

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Recommendation made	Priority Level	Manager Responsible	Due Date	Current Progress
				<p>Leader so that a decision can be made before the 56 day limit.</p> <p>Where cases have not met the 56-day rule, clear notes should be held on file explaining why.</p> <p>The data is formatted to automatically show duration and flag up any issues.</p> <p><i>Internal audit comment:</i></p> <p><i>Recommendation closed by Internal Audit following receipt of a screenshot of the template created for weekly Relief and Prevention Audits and an example of the checks carried.</i></p>



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