Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Reablement (Jun-13)	Effective	n/a – no recommendations made	n/a – no recommendations made	G
Local Sustainable Transport Fund (Large Bid) (Jun-13)	Some Improvement Needed	Develop a system for estimating the value of work-in-progress relating to smaller capital works orders for LSTF delivery. (M)	The strategic design team have been sending a monthly financial accrual spreadsheet into Tania Rocks to put a work in progress (WIP) value in SAP. The achievement of Gateway 3 in the construction process must be dated for an accrual to be raised in SAP. The value of the accrual entered into SAP is based on the percentage complete of that scheme. When the actual claim comes in for these completed works the WIP values in SAP are reversed.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Local Sustainable Transport Fund (Large Bid) (Jun-13)	Some Improvement Needed	Strategic Projects staff to submit fully supported details of accrued scheme expenditure for 2013/14 promptly at year-end. (M) A comparison of actual to expected time charged to the LSTF projects to be	Programmed to happen as part of the closure of accounts for 2013/14. Every month a download from the ETCi system has been presented to the delivery board for review. On	G
		discussed quarterly to the LSTF Project Board. (M)	reviewing this information the delivery board have taken mitigating actions to address under charging of staff time.	G
		Strengthen use of formal project management tools in 2013/14 to improve task monitoring and financial reporting. (M)	A new simplified plan was created for each town in the programme (Guildford, Woking and Redhill & Reigate). The town plans include information on scheme budgets, spend and progress. These have been kept up to date on at least a monthly basis and have been used as a tool to update the working groups.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
		Apply tighter grant funding criteria to ensure a better focus on sustainable transport. (M)	New criteria led to both a larger number of bids rejected during the 2013/14 programme and led to better quality of bids more closely aligned to the programme received.	A
		Secure a signed licence to work on site at the Onslow Park and Ride Scheme. (M) Consider improving the perimeter fencing around the Onslow P&R construction site. (M)] Construction works now complete.	G
Highways Contract Management	Some Improvement Needed	The sub-contract should be reviewed in the light of the lessons learned to ensure it meets Surrey's contract requirements. (H)	Completed.	G
Lot 5 (highway flood prevention) (Jun-13)		The new sub-contractor should be closely monitored to ensure that the service improvements over the past six months are not lost. (H)	Completed.	G
		It is recommended that procedures to follow up cleansing failures are put in place to ensure they are not overlooked or ignored. (H)	Completed and ongoing.	G
		It is recommended that consideration is given to enabling wider access to Asset Planning data where it will support operational areas. (M)	Supplier for a new system is currently being procured after which enabling wider access will be reviewed.	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Highways Contract Management Lot 1 follow-up (Jun-13)	Some Improvement Needed	There were no new recommendations 21 of the original 25 recommendations were completed; the remaining 4 are rated as amber and will continue to be monitored. • A new interface between SAP and Maximo, to prevent manual intervention of payment after budget holder approval, was to introduced by 30th October 2013 (H)	The SAP interface was completed as planned. The development to prevent the manual intervention after approval was completed the preceding year.	G
		 A training programme was to be delivered by 1st September 2013 to ensure that all staff fully understand how to apply schedule of rates. (M) 	This was completed and further improvements are being developed.	G
		A revised Confirmation of Verbal Instruction (CVI) form was to be in place by 30th June 2013 to ensure that both price and re-measure are recorded and signed by the client before completion. Clients shall reject any CVI without pre-approved signatures. (M)	This was implemented as planned and additional improvements have been created. This was delivered after 30th September but was	G
		 Maximo Improvement Project and training was to be delivered by 30th September 2013. (H) 	completed by 31 December.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
ICS ContrOCC (Jun-13)	Some Improvement Needed (additional opinion of Major Improvement Needed on project management elements of the review)	CSS should ensure that, in future, projects are planned in sufficient detail before proceeding to implementation. (H) CSS should ensure that all projects are supported by complete and thorough business cases which provide full justification for the expenditure of time and money. (H) CSS should ensure that they are appropriately represented at Board meetings for projects which relate to their operations. (H) CSS to build upon work already undertaken, and continue its efforts to improve the quality of its data. (M)	In order to assess whether the ContrOCC system meets current and future user requirements, CSS has decided against immediately progressing with the implementation of Phase 2. A small-scale pilot will be run in 2014-15 instead, solely covering payments to agency providers. This will provide insights into the resources required for Phase 2, give the service time to assess the justification for the project, and plan appropriately.	G
Head Teachers' Pay (Jul-13)	Some Improvement Needed	The Governors' Newsletter to include advice on the need to retain documentary evidence around decisions related to Pay Group; Individual School Range; and, increases in the Leadership Scale. School Improvement Officers to challenge these decisions as appropriate. (M)	Not completed, information awaited. Internal Audit made contact with Lead at Babcock 4S for School Governance.	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Financial assessment end to end process (Jul-13)	n/a (Position Statement)	n/a – there were no audit recommendations. The information from this review was used to inform the Rapid Improvement Event that took place in June 2013.	n/a	G
Youth Transform- ation (Jul-13)	Some Improvement Needed	SYP should consider reviewing performance management co-ordination to ensure that performance data reflecting the integrated nature of the Service is produced in an efficient manner. (M)	Surrey Outdoor Learning and Development performance now feeds into Leader's Ready for Work Programme scorecard.	G
		SYP should ensure that all activities which supplement the work in the delivery models have mechanisms which allow their effectiveness to be evaluated and understood. (M)	Re-engagement is now recognised by DfE as an intermediate step between NEET (not in education, employment or training) and PETE (participation in education, training or employment). This provision is monitored in SYP report cards.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Risk Management Arrangements – Position Statement (Jul-13)	n/a (Position Statement)	Risk registers on S:net should be up to date with correct details for all staff to rely on and use in their work. (H). The up to date Policy Statement, risk framework and strategy should be maintained on the S:net and publicised to enable all staff in the Council to be aware and fulfil their responsibilities. Any changes to the decisions made by the A&GC should be reported to the Committee for their approval before they take place (H).	Much improvement, but some delays and variability in currency still noted. The up-to-date Policy Statement and Strategy was approved by the Audit Governance Committee (A&GC) on 24 June 2013 and commended to Council for inclusion into the Constitution. Risk Framework has been updated and reviewed by the SRF. All these documents have been uploaded to the SNET. Corporate Board, Strategic Risk Forum and Risk Reps have been updated on the changes. The CRRF to be updated at next meeting in September 2014. The Audit and Governance Committee has also been updated.	A
		The risk management guidance on S:net should be comprehensive and up to date with all the links working for staff in services to comply with the Council's requirements for risk management arrangements (H). There should be a formal escalation policy to ensure that non-compliance with risk management responsibilities at all levels in the Council are highlighted in a timely manner and dealt with adequately (M).	Risk management guidance page updated on SNET to include risk induction pack and information on risk workshops. The list of Risk Reps has been updated. Risk framework updated to include more detailed guidance on Risk registers. SRF has received monthly exception reports on out of date risk registers and actions noted.	A

Notes: (1) Audit opinion is as stated in the relevant Internal Audit Report

⁽²⁾ Recommendation priority may be High (H), Medium (M) or Low (L) (3) Red/Amber/Green (RAG) status is a high level assessment of progress

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Employee Expenses (Jul-13)	Some Improvement Needed	Management should either simplify the policy or consider a GPS technology based solution to recording mileage which would reduce the need for staff to interpret policy. (M) Management should consider if the current contractual user bands are appropriate. The auditor recommends that there should be a minimal mileage required. Management should consider meeting the requirement for a contractual driver by other means (such as use of Streetcar). (L) A consistent format for inputting travel data onto TRIP should be designed and used across the council. This would ensure all relevant data was available and journeys could easily be verified. (M) Management should consider their position regarding historic mileage completed by employees who deducted more miles than necessary according to policy. (M)	UPDATE BEING SOUGHT	

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Community Enhancement Fund (CEF) (Aug-13)	Some Improvement Needed	It is acknowledged that the sums involved are not material in the overall picture of LC and SCC managed expenditure. Nevertheless, as public funds are involved and are being managed by the elected members for the benefit of their constituents it is recommended that LCs adopt a more open approach to the reporting of information relating to the use of the CEF by provision of regular reports to their meetings. As a minimum this should include: • brief description of the scheme being funded; • amount of contribution; • funding member, and • overall cost of the scheme. (M) Management should continue to monitor spend of CEF in order to ensure that it is directed in the most beneficial way and in line with the original aims for the fund. (M)	Monthly reports have been sent to Members since the last audit. And there will be a report to Committee in June / July as planned.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Information Governance in schools (Aug-13)	Some Improvement needed	The recommendations related to providing more information and guidance from the centre (M). It was noted that a series of seminars have been provided for schools highlighting security of information since the review was completed (the auditor attended one that was fully subscribed)	The seminars were well attended and presentations were by the council's Information Governance officer and one of the solicitors	G
Purchasing Cards - follow up audit (Aug-13)	Effective	Procurement management to ensure revised Procurement Standing Orders (PSO) emphasise Purchasing Card Rules and Guidance (M).	New PSO (issue 5 - published in October 2013) Section on Purchase cards makes clear the rules	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
European Grant Funding (Aug-13)	n/a (Position Statement)	Subject to further discussion and approval with members and senior officers, the fundamental recommendations emerging from the review were: To endorse the work of the European Affairs Manager to date, the programme of work thus far, and recognise the historical funding secured to date; To recommend that the Council does more of the same, which carries resourcing implications; To recommend that the Council develops a transparent process to enable this to be implemented; and To recommend that the Council makes its EU-related activity more visible A pilot stage to develop these recommendations further was agreed with the Cabinet Member on 16 July 2013.	Both officers leading on this exercise have now left the employ of Surrey County Council The dedicated officer post has been retained within the latest proposed reorganisation of the E&I Directorate. The proposal is that the post be transferred to Chief Executives with unchanged terms and conditions. That proposal is part of the wider package of measures out for consultation until late June.	A

⁽²⁾ Recommendation priority may be High (H), Medium (M) or Low (L) (3) Red/Amber/Green (RAG) status is a high level assessment of progress

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Energy Management (Aug-13)	Some Improvement Needed	To discuss and agree with members a revised set of carbon omission and energy reduction targets. Staff may also need to revisit the basis of monitoring these targets. (H)	Property and Sustainability Teams have produced a draft policy for 2014-2018, which includes a carbon reduction target of 10% (baseline 2013-14) over four years for the corporate estate, street lighting and maintained schools. Further work on the 2013-14 Carbon and Energy Policy is ongoing and input will be sought from the incoming Energy Manager (starting in June). The policy will be presented to Cabinet in due course, probably in September / October 2014.	A
		The Energy Manager should project plan the completion of all CRC submission tasks and work for the Green House Gases report 2013/14, in detail for the 2014 deadlines. (M).	The project plan for delivery of the CRC and GHG submission is being developed at by both EMT and Sustainability, respectively. EMT has met with Sustainability and Finance and Internal Audit to inform the programme. The Project Plans will be formalised in the next few weeks and will have a completion date of 31 July 2014 to meet the deadlines for both CRC and GHG submission.	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Energy Management (Aug-13)	Some Improvement Needed	The Procurement and EMT should continue to develop energy benchmarking data, for building managers and budget holders, along with some interpretation to help better management of energy expenditure. (M)	SCC has become a full participating member of the London Energy Project (LEP). In December 2013 we received the LEP 'Achieved Prices Benchmark & Risk Assessment Report'. This is a Value for Money Assessment on LASER contracts for 2010-13. In summary three out of the four energy contracts achieved 'Very Good Performance' and the fourth was 'Effective'.	G
			A further 50 schools have recently been surveyed to compare their non-LASER prices with the LASER contracts. Analysis and follow-up to be completed in April/May 2014.	
			Monthly financial budget reporting is in place and reviewed by Property SMT and Finance accountants.	
			Individual sites have been categorised and CIBSE Building Benchmarking information has been inputted into the SystemsLink Database. The 2013/14 CRC data will be used to start producing regular benchmarking.	
		The Energy Management Team should undertake an annual exercise to test check a small sample of LASER invoices. (M)	EMT requested and received data on 12 random LASER invoices this month. Questions and analysis to be completed by May 2014. This is the second year of an annual exercise.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Energy Management (Aug-13)	Some Improvement Needed	The Energy Management Team (EMT) should prepare payback on investment KPIs for all of its energy efficiency lighting schemes in the last three years to assess whether expected payback periods are reasonable, the impact of asbestos and the right types of investment are being considered. (M)	The EMT has commenced a desktop exercise to review the investments over the past year to establish payback periods for the different types of lighting replacements. Initial desktop analysis has proved to be difficult primarily due the lack of accurate data for the lighting circuit usage both before and after a project and changes in site activity and efficiency. The impact of asbestos costs has been very limited. Going forward EMT will carry out sample savings calculations based on lighting inventories, similar to the Salix method. This report is anticipated to be available by June 2014. Also there will be some random site visits that will ascertain the set-up of the system and any change in occupancy/ hours etc. It should be noted that for 2014/15 and beyond the CRC programme has widened its scope to include more insulation and biomass projects.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Insurance (Sep-13)	Some Improvement Needed	Consider what confirmations of compliance with conditions of insurance should be obtained each year. (M)	Service monitor compliance through enquiries received from services, as well as monitoring what is happening in the market. For example, the risk of exposure to the negligent actions of contractors, by ensuring that insurance and indemnities are in place when delegating responsibilities to contractors. There is still no active seeking of assurance over compliance with conditions.	A
		Develop enhanced web pages on the SNET and the SCC external website that provide explanatory and support materials on SCC's insurance arrangements and its use as a risk management tool. (M)	This is still work in progress, as the Service wish to include an automated, paperless method by which claims can be put through our web pages rather than simply having a downloadable form for completion. An external consultant has been engaged to work with the team on this point. FAQs have been put together. The massive increase in claims volumes (currently c2700 claims since January compared to the same number for the whole of last year) has also been a factor in this being work in progress.	A
		Highways issues resulting in additional compensation claims should be used to enhance the Highways Risk Register and to identify the responses required. (M)	This continues with regular quarterly reporting and monitoring of the new 5 day response criteria. The Risk Register shows risks at a high level of detail making claims issues hard to identify.	A
		All claims resulting from May Gurney implementing changes to SCC Policy ahead of schedule to be passed to May Gurney for prompt settlement. (M)	All such claims are being passed on to May Gurney and the team is working with them to ensure prompt customer responses given.	G
Notes: (1) Audit opin (2) Recomme (3) Red/Ambe	ion is as stated in the re indation priority may be l er Green (RAG) status is	The Insurance Team should work with the Risktand Resilience Forum and relevant for the Risktand Resilience Forum and relevant for the Risk where a see	<u> </u>	

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Direct Payments (Sep-13)	Some Improvement Needed	Management must seek to achieve the target of all service users receiving a SCR at least annually (H) There should be regular reporting to ASC Select Committee to allow monitoring of the number of overdue social acre reviews (H) Management must either invest further resources in chasing late reconciliations, taking more serious action against failures to complete required paperwork and ensuring that adequate support is available to service users struggling to complete their reconciliations, or alternative action is required. Management could, for example, consider outsourcing the reconciliation element of DP management. (H) By reducing the frequency of reconciliation required for lower risk (low value, stable care packages) DPs the staff could focus on the higher risk reconciliations.	ASC are still not able to provide at least annual review to all service users. ASC have developed an extensive set of management reports to assist in the management of workload and have consistently improved their position since the initial audit. The management reports have highlighted significant data quality issues which are being addressed through the process. The Select Committee are happy with the current reporting in place. The shortfall in completion of reconciliation persists but the planned use of prepaid cards, and the subsequent improvement in audit trail and transaction recording should improve the situation.	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Street Works Function (Sep-13)	Some Improvement Needed	The budgets for the Team should be reviewed in line with the introduction of the proposed changes (i.e. Permit Scheme) and reset on a zero based budget basis to determine the actual staffing and other requirements of the team (H) .	The staffing and Permit income budgets were reset for 2013/14 (Nov.'13 – Mar '14) and 2014/15 on an estimated basis and will need refining for 2015/16 after the scheme has fully embedded. It has taken 6 months to implement the scheme, recruit to correct staffing levels and provide ongoing training.	A
		The realistic income achievable including Coring Income for defective work should be re-evaluated. The cost and income for coring activities should sit within the Street Works budget (M).	Previous referrals for Coring were based on random samples. Positive changes such as intelligence led referrals as well as random referrals and a dialogue with the budget holder for Coring income in Asset Planning Group have been established in the past few months as a way of refining the costs and income associated with Coring later this year. Also Coring income is not dependant on Permit income.	A
		An SLA should be agreed between the Materials Laboratory Team and the Street Works Team specifying the requirements that need to be met to ensure the completion of Street Works Team's investigatory inspections (H).	In view of the above changes, more time is needed to determine accurately, the volume and nature of work as well as ways of resolving issues arising from 'Core' failures due to defects by utilities. As such, the SLA is not likely to be agreed until later in the year.	A
			Progress on the above areas will be reviewed as part of the Permit Scheme audit in quarter 4 of 2014/15.	

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Street Works Function cont'd (Sep-13)	Some Improvement Needed	The spreadsheets maintained by the team for the inspection charges raised should be reviewed regularly to ensure that they contain adequate details with the use of control totals to ensure accuracy and transparency (M).	Dedicated resources are in place to improve the accuracy and transparency of information on the spreadsheet by breaking down the summary of changes to show them individually and using control totals as appropriate.	G
		Debt recovery arrangements between the Street Works Team and the Income Management Officers should be reviewed as a matter of priority. (H).	There are dedicated resources within the Street Works Team to ensure that correct processes are followed by raising timely invoices and checking receipt of income on a monthly basis. If income is not received when due, dialogue is maintained with the Income Management Officers to follow the Council's debt management process. Uncollectible debts have to be authorised by the Traffic and Street Works Manager before being written off.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Data Centre (Sep-13)	Some Improvement Needed	The DHCP server is replicated to another site and fail-over provision is installed as soon as possible. (H)	Completed	G
		Until such time as the potential to provide services to partners is no longer an ongoing concern, the Council Overview and Scrutiny Committee should be appraised as to the uptake of services by partners. (L)	A share funded post is in post for the onboarding of partners. As there is already a financial commitment IMT does not consider this to be an ongoing concern.	G
		The Business Continuity Management System Project requires top management support in order improve and enhance business continuity planning. (M)	IMT is supporting this via joint working and is committed to enhancing business planning.	G
		In order to ensure that growth of IT usage at the Primary data centre does not outstrip capacity provision at the backup data centre an annual assessment of the available capacity should be undertaken. It is envisioned that this would be a desktop review as opposed to a stress test. The results from this annual assessment should be reviewed by the Head of IMT. (M)	Current capacity at the backup site is well within backup provision.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
ASC Safeguarding Assurance Process (Oct-13)	Some Improvement Needed	Consider implementing checks to ensure corrective actions noted in audits have been completed. (H)	Central tracking sheet in place recording all actions arising from each audit. This is circulated monthly to Senior Managers to gain assurance from Team Managers that actions have been completed.	G
(001 10)		Remind teams of the importance of accurately recording case closures, and consider further monitoring to ensure improvement. (H)	Focused work by Information Quality Assistants with Locality Teams to monitor number of closures. Oversight by PCS Senior Managers.	G
		Consider amending audit templates in order to capture: • the agreement of the manager of the team being audited with the findings; • lessons learned; • specific corrective actions required; and, • the timescales in which those actions must be completed. (M)	The Audit tool has been revised and now captures the points recommended within the audit report.	G
		Consider agreeing an articulated reporting framework with PC&S Leadership Team. (M)	Quarterly analysis shared with the Leadership Team and cascaded to ASM's, TM's and SGA's.	G
		The Safeguarding Adults Senior Manager should consider, based on levels of risk, extending assurance work to cover Safeguarding processes in Service Delivery. (M)	Safeguarding Adults Quality Assurance Framework now includes Service Delivery.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Health & Dental Checks – Children in Care (follow up)	Major Improvement Needed	CSS should consider reporting performance on LAC health and dental checks separately, rather than exclusively using the existing combined indicator. (M)	Health checks are now being reported separately.	G
(Oct-13)		CSS should consider using the current review of health services for LAC being led by the Guildford and Waverley Clinical Commissioning Group (with input from the CSS Commissioning team) to ensure the efficient flow of all information related to health checks. (H)	Work is underway with the CCG to improve service delivery to LAC requiring health checks. There is a clear action plan in place, and a report went to the Corporate Parenting Board specifically about Health Assessments in January 2014.	G
		CSS should consider revising its reporting of health checks to only indicate a positive once all accompanying documentation has been received. (H)	CSS have considered this and intend to continue to record health checks as completed on notification, however they are now additionally recording receipt of associated documentation.	G
School Purchase Cards (Nov-13)	Some Improvement Needed	Corporate banking team to obtain access to software available from HSBC (M)	Update 25/4/2014 Not completed awaiting decision of changing card supplier. The council will now change but not the schools. Banking team will progress the original recommendation	A
		Internal Audit to publish a summary of findings in the School's Bulletin (M)	Published November 2013	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Library Service Global Transport Van Service (Nov-13)	n/a (Position Statement)	Library Service to request that the current contractor provides its own further detailed options for reducing the cost of the Service and facilitating increased flexibility in the contract should further Community Link Libraries be developed. (M)	We are shortly to begin the process of re-tendering for the library services transport contract for an award in April 2015. Providing measurable financial savings and increased flexibility in the new contract will form a key part of the required tender response. Only one additional Community Link has been developed since the audit and this has not impacted on the current delivery service. However, it is recognised that the need for a contract that enables the service to take a very flexible and cost effective approach to library transport is essential.	A
		The Procurement Category Specialist should liaise at an early stage with ESCC Libraries service on any mutual benefits of joint procurement or direct delivery of a library transport vans services. (M)	As part of the tender planning process we will discuss the potential joint procurement with neighbouring library authorities. An initial discussion with one has already taken place but did not identify any synergies. Some interest has already been shown by two community Transport providers.	A
Blue Badges (Nov-13)	Effective	Five low priority recommendations were made	n/a only Low Priority "best practice" recommendations made	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Social Care Debt – Credit Balances (Nov-13)	Major Improvement Needed	Reporting on Social Care Debt to the ASC Select Committee must include a regular update on gross credit balances. (M)	Credit balances reported separately to the ASC Select Committee meeting (March 2014).	G
		A systematic approach should be adopted to manage deceased client credit balances. All balances including those in the suspense account must be investigated (H) .	Investigation has not commenced into the Suspense account balances due to a lack of available resource, the service is undertaking a review of the processes and hopes to free up a resource to start this work, estimated time July.	A
		Explanatory notes/copies of correspondence should be recorded on AIS or WISDOM. (H)	Access to a WISDOM folder has been granted to Credit Control and correspondence is saved to the folder.	G
		The Personal Care and Support and ASC Finance teams should work together to produce clear guidance for managing credit balances including an escalation process for cases where the next of kin or beneficiaries cannot be traced. (M)	Draft guidance has been issued by Jackie Knutton for comments.	A
		If it is not possible to trace the next of kin or executors, balances of less than or equal to £500 should be transferred to the home's welfare fund. Where the deceased died without a will or any living relatives individual balances over £500 should be referred to TSoL. (M)	Deputyship welfare account opened in April 2014 to transfer balances of less than £500. Work on transferring balances can not start until there are available resource anticipate starting work in July.	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
SCC's Contract Management Framework (Nov-13)	Some Improvement Needed	The Framework developed by SCC procurement should be described on SNET and referenced in an update to the SCC Procurement Team's 'Contract Management Manual 2012'. (M)	Materials now added to SNET.	G
		The In-tend Implementation Project should be advertised on SNET with a statement of support for the Project Sponsor, explaining its benefits. (M)	A draft announcement has been prepared and is awaiting clearance.	A
		The Head of Procurement should seek clear CLT endorsement of the contract management framework roll-out project. Each Directorate should be asked to select timeframes for the roll-out of the project by 31 March 2015. A formal project plan for a properly resourced and prioritised roll-out of the framework should be agreed by 31 March 2014. (H)	Update from Head of Service awaited.	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
SCC's Contract Management Framework cont'd (Nov-13)	Some Improvement Needed	The In-tend implementation Project Officer should give further consideration to the controls in place over data entry in the CMS system to ensure that data is more consistently recorded and can then be easily queried. (M)	A review was conducted and some changes were made to avoid duplication of data entry when creating new contracts with the system.	G
		For the Mainstream School Coach contract, the Transport Co-ordination Centre Team Manager should consider the need for specific risk register entries regarding the risks to children re: collection after alighting from SCC-commissioned coach services, the lack of escorts on reception class coaches and the use of CCTV on school transport coaches. These risks will need discussing with the Schools & Learning Service client. (M)	Considered as part of a recent risk register review.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Health & Safety in Schools (Dec-13)	Some Improvement Needed	Management from Schools Health & Safety (Strategic Risk Management) to liaise with Property Services to formalise arrangements for information exchange (eg of health and safety risks recorded on PAMS) (M)	Evidence of formal (email) liaison noted on Strategic Managers Computer	G
		Property Services to maintain a formal record of statutory inspections in schools and inform the Strategic Risk Team Manager in Children' Schools and Families when these have not taken place. (M)	Not due for completion until Autumn Term 2014	A

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Smallholding (Rural Estate) (Dec-13)	Some Improvement Needed	Management should ensure that the management plan detailing preferred / intended options at the individual property level is completed as soon as possible and that the appropriate management and member approvals are received prior to its implementation. (M)	The draft operational policy now needs to be considered in the light of returning the estate management service in house to ensure it fits with internal estate management arrangements. It will be considered by Members by 31 July 2014.	G
		In the production of the more detailed action plan to support achievement of the stated objectives for the RE, management should ensure that all relevant options are considered, consulted on and properly costed. In particular, options available around the methods that could legitimately be employed to facilitate amalgamation of tenancies should be explored. (M)	The individual estate plan will be considered by property services SMT on 6 th May 2014	G
		Management should prepare a plan for addressing the current backlog in maintenance which should include details of funding sources to be employed and indicative target dates aligned with any planned development for individual properties. The plan should be subject to regular review an update to reflect the present status 'on the ground'. (M)	A number of properties have been identified for refurbishments several of which are now progressing. A planned maintenance programme to be finalised by 30.4.14 as part of forecasting planned maintenance budget for 2014/5 Priorities for the £400k investment fund as part of the MTFP will also be agreed, depending on feedback from certain tenants.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Trust Funds (Dec-13)	Some Improvement Needed	Management should review the arrangements surrounding the control and reporting of trust funds to aid transparency where the county council operates as the sole custodian. (M Management should ensure that funding recipients provide the required evidence of expenditure and that this is subject to scrutiny as appropriate. In cases where funds remain unexpended then these should be recovered as soon as practicable. (M) Management should continue to ensure that the required information is received in a timely manner from Community Foundation for Surrey along with adequate and independent assurance as to its accuracy and completeness. (M) Management should review the options for the future use of the Henrietta Parker Trust in order to ensure that the maximum benefit may be obtained for its intended recipients within any attached legal constraints. The review should actively seek the views of both current and potential users, local members and any other interested parties. (M)	A report was taken to the last A&G Committee meeting regarding Simplifying & Streamlining the Accounts. This issue was discussed as part of this item and it was agreed that while the Trust Funds note as it stands would be removed, the high level numbers would be highlighted and signposted to where further information can be obtained for interested parties. The action is on track — evidence is being received for projects completed and where not completed, discussions have taken place and new end dates have been agreed as necessary. Cheryl Poole, the Community Partnership & Committee Officer for Elmbridge has agreed to join Peter Milton to challenge and set targets, and review the use of the funds on an annual basis for the Service's use of the HP trust. A meeting is scheduled for early May to brief Cheryl on the historic operation. A further meeting is planned for June to set targets for the 2014-15 academic year. Finance were approached to join the review group. However, they felt they needed to remain at arms length from such a process to maintain the integrity of their Finance role.	G

Audit (report date)	Audit opinion (1)	Recommendations for improvement (priority) (2)	Management action to date	Audit assessment (RAG) (3)
Residential Care Homes – Managing Residents' Monies – Follow-up Audit (Dec-13)	Effective	N/A no recommendations made	N/A no recommendations made	G
Surrey Local Assistance Scheme (Dec-13)	Effective	N/A no recommendations made	N/A no recommendations made	G

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