

North Somerset Council

REPORT TO THE	AUDIT COMMITTEE
DATE OF MEETING:	30 MARCH 2017
SUBJECT OF REPORT:	AUDIT & ASSURANCE ANNUAL REPORT 2016-17
TOWN OR PARISH:	NONE
OFFICER/PRESENTING:	JEFF WRING - HEAD OF AUDIT WEST
KEY DECISION:	NO

RECOMMENDATIONS:

The Audit Committee notes the Internal Audit Annual Report 2016-17.

SUMMARY OF REPORT

The Audit Committee has received updates during the year on progress in delivering the Annual Audit Assurance Plan 2016-17. As at the 30th March the plan has been substantially completed and this is the annual report to the Committee for the financial year. Also included is a summary of audit performance and key issues, as well as the formal opinion on the internal control framework.

1. POLICY

The work of the Internal Audit Service provides independent assurance to the council's senior officers and members that governance, risk management and controls are sufficient to ensure delivery of the council's objectives. As part of meeting statutory and professional requirements the Head of Audit is also required to provide an opinion on the council's internal control environment.

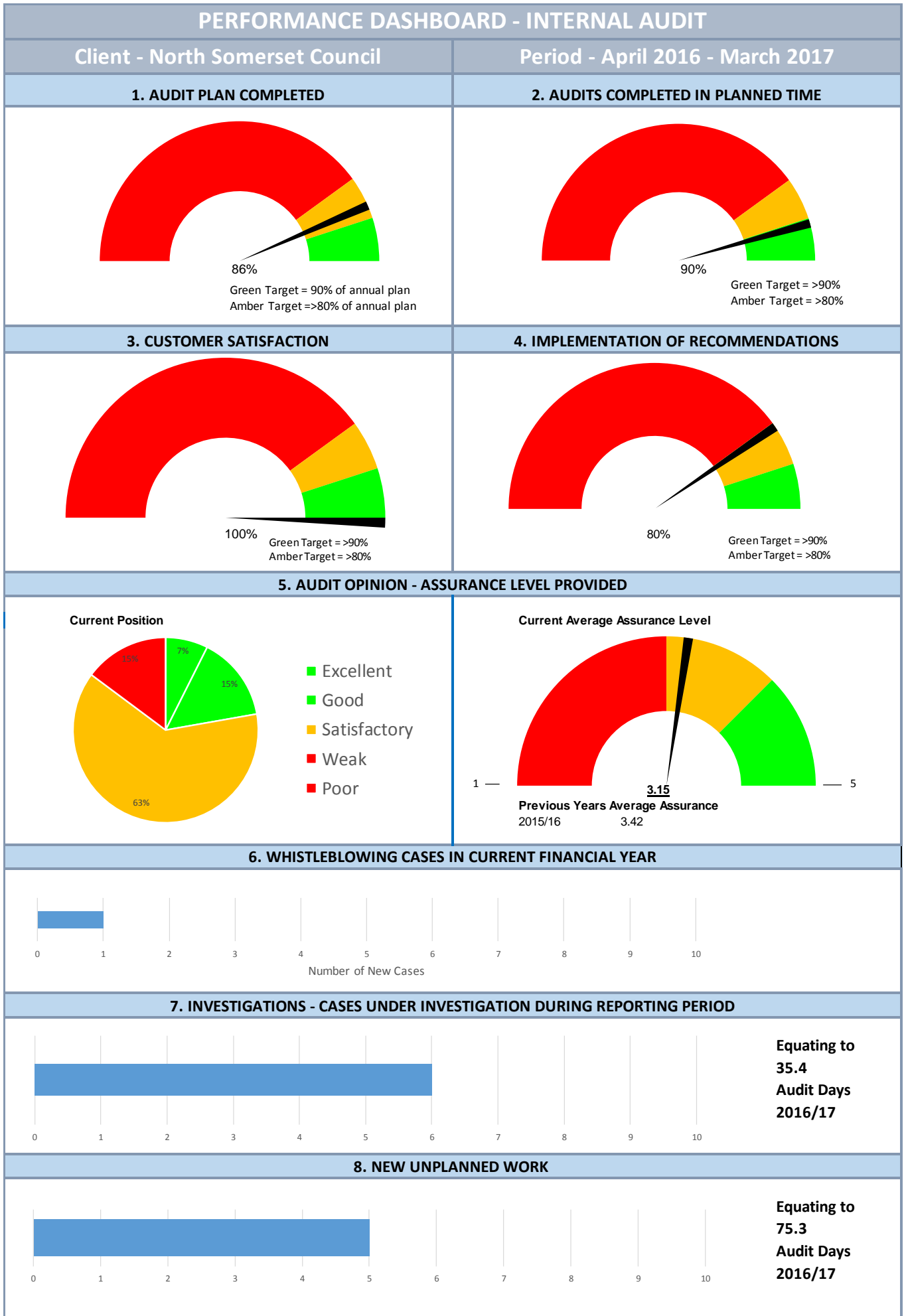
2. DETAILS

At its meeting of 3 March 2016, the Audit Committee approved the Annual Audit Assurance Plan for 2016-17. The Plan forms the principal work of the Internal Audit Service and is a significant source of assurance of the effectiveness of the council's internal control environment.

In determining the scope, depth and breadth of the Audit Assurance Plan, the Audit Committee accepts limitations in coverage and the inherent risks associated with this. As resources reduce, audit coverage is affected and this increases the risk in the level of assurance achieved through delivering the audit plan.

The Audit Committee most recently received an update on delivery against the plan on the 1st December 2016. This report builds upon that update.

INTERNAL AUDIT PERFORMANCE



AUDIT REVIEWS – POSITION STATEMENT

Ref	Topic	Status	Assurance Level	Recommendations	
				Made	Agreed
16-001N	Key Suppliers – Contract Management	Fieldwork			
16-002N	Strategic Overview – Procurement	Completed	Position Statement		
16-003N	Data Analytics – Contracts	Completed	3	0	0
16-004N	Commissioning Intentions – Contract Register	Completed	3	7	7
16-005N	Highways Network Asset Management	Completed	2	7	7
16-006N	Capital Programme Management	Completed	Position Statement		
16-007N	Fleet Management	Completed	Consultancy		
16-008N	Key Suppliers – Performance Management	Completed	Combined with 16-001N		
16-009N	High Impact Families Grant Claim	Completed	4	0	0
16-010N	Council Tax - Data Quality	Completed	5	0	0
16-011N	Planning - Development Control	Completed	4	7	7
16-012N	Street Works	Not Started			
16-013N	Traffic Management	Not Started			
16-014N	Regulatory Services – Public Protection	Completed	3	7	7
16-015N	Tell Us Once (Connected Data)	Completed	3	9	9
16-016N	Corporate Risk Register	Completed	Facilitation		
16-017N	Transformation Programme	Completed	3	5	5
16-018N	Insurance Act 2015	Completed	N/A	5	4
16-019N	Social Impact Bond	Completed	Position Statement		
16-020N	Public Health	Not Started			
16-021N	Payment Cards	Completed	Consultancy		
16-022N	Foster Carers	Completed	3	4	4
16-023N	Care Homes	Completed	3	4	4
16-024N	Safeguarding in Schools	Completed	4	2	2
16-025N	Late Payments & Use of Purchase Orders	Completed	3	0	0
16-026N	Risk & Robustness Statement	Completed	Facilitation		
16-027N	Repayment of Training Fees	Completed	2	3	3
16-028N	Debt Management	Completed	3	11	11
16-029N	Core Financial Systems	Completed	4	3	3
16-030N	Seafront Retail Operations	Completed	n/a	13	13
16-031N	Cost & Volume Analysis	Not Started			
16-032N	Better Care Fund	Completed	3	0	0
16-033N	Direct Payments	Completed	2	10	10
16-034N	Financial Assessments (Referral & Charging)	Not Started			
16-035N	HR Policies Compliance (Sickness)	Completed	3	5	5
16-036N	Employment Procedures	Completed	2	5	5
16-037N	Annual Governance Review	Completed	Facilitation		
16-038N	Members Allowances	Completed	3	7	7
16-039N	Members Code of Conduct	Completed	3	3	3
16-040N	School Audits	Completed	Various 7 Schools		
16-041N	Licensing – Website	Completed	3	2	2
16-042N	ICT - Various	Fieldwork			
16-043N	Information Security	Completed	3	15	15
16-044N	South West Grid for Learning	Completed	3	4	4
16-045N	Children’s Centre’s Software	Completed	3	0	0
16-046N	City Deal	Completed	Position Statement		
16-047N	Economic Regeneration & Major Projects	Completed	Position Statement		
16-048N	South Bristol Link Road	Completed	Grant Claim		
16-049N	Metrobus Grant Claim	Completed	5	0	0
16-104N	School	Investigation	n/a		
16-105N	Housing	Investigation	n/a		
16-201N	Worle Community School	Completed	n/a	9	9
16-202N	Scheme of Delegation	Completed	n/a	6	6
16-203N	High Impact Families Grant Claim	Completed	4	0	0
16-204N	Webber Bus	Completed	2	1	1
16-205N	School Meals	Completed	2	6	6

PERFORMANCE SUMMARY

A) COMPLETION OF THE INTERNAL AUDIT PLAN

The performance dashboard shows that at the time of writing this report 86% of audits have either been fully completed or are at reporting stage.

As reported mid-year, the ability to achieve 100% of planned work was being affected by the amount of unplanned activity that the service were undertaking, both in relation to investigations and specific management requests for audit work.

Notwithstanding this, Audit West has been able to draw upon additional resources from across the partnership and thus performance has still remained very strong, enabling a good balance between planned and unplanned work. The Head of Audit West and the Internal Audit Manager would like to thank the team for all of their hard work during the past year.

B) AUDIT REVIEWS COMPLETED IN ASSIGNED DAYS

The percentage of audit reviews completed within the assigned days is 91%. This is an excellent performance and well in excess of the target set.

Only a small number of audit overruns occurred and these were predominantly in areas where additional value was added. One such example of this is referenced below (C), where the service being audited were extremely pleased with the work undertaken and requested additional resource to be provided to review some further processes and procedures which were outside of the original audit scope.

We continue to promote overruns in circumstances where additional audit time can yield increased benefits for the council, or where important control issues are found.

C) CUSTOMER SERVICE

Customer service and providing value to clients remains at the heart of the Partnership. We are pleased to report the performance remains at 100% and continues to demonstrate extremely high levels of satisfaction.

One such example of the quality of service that has been provided this year was captured in an email from an Assistant Director, sent to a member of the Audit Team and copied into the Chief Executive:

“The audit has been a very valuable exercise and it has given (officer) the opportunity to focus her efforts on making some real service improvements”.

“The approach you have taken has been collaborative and supportive. As you are aware (officer) is new to management and the support you have provided has helped her settle in to her new role”.

“In all my years of local government I have never known a manager describe an internal audit as “really enjoyable””.

We also continue to receive excellent feedback in relation to our non-audit activities and this is demonstrated by the continued growth in this area.

D) IMPLEMENTATION & FOLLOW UP OF RECOMMENDATIONS

There were a total of 20 high level recommendations due to be implemented in 2016/17. Of these, 80% (16) were implemented and 20% (4) have not yet been implemented.

The reasons for the recommendations not being implemented are summarised below and are detailed in full in Appendix B of this report:

Recommendation 1: Repayment of Training Expenses

Management to agree a new system to ensure that all supported training is known and recorded, possibly to be achieved through centralising training budgets.

The recommendation is still outstanding, as the centralisation of training budgets was investigated but felt not feasible. In addition, there is now a freeze on training (which therefore means that the council is not currently funding any professional training). However, management in this service area have agreed to review the process once the training freeze has been lifted and likewise the internal audit service will look to review other parts of this process during a review of 'Starters and Leavers' in the 2017-18 plan

Recommendation 2: Pensions Data Submissions

Management to work with the pension provider to identify solutions to increase automation and reduce manual intervention.

Implementation of this recommendation is ongoing but has not yet been fully implemented. A report is being produced to reduce manual intervention/ increase automation, however this has not yet been completed and once done will be subject to further testing/ tweaking. Dialogue is ongoing with the officer responsible for implementing this solution.

Recommendation 3: Members Code of Conduct

The Members code of conduct should be amended to include acceptable procedures and values for the receipt of gifts and hospitality, as well as a register for declarations

This recommendation is due to be taken to full Council. This has not been done so yet but will be confirmed with the Head of Legal and Democratic Services that it will be taken to the May 2017 meeting.

Recommendation 4: Transformation Programme

The new programme tracker reporting tool does not provide adequate information to all stakeholders in terms of financial costs and savings, or planned vs actual dates.

Whilst there has been development on the financial reporting side of the Transformation Programme and reporting takes place to CMT on a quarterly basis, the programme tracker reporting tool is not yet fully established. Therefore, this has been reported again and will be followed-up during the 2017-18 'Transformation and Project Management' Audit.

E) ASSURANCE LEVEL PROVIDED

During the year, 85% of audits completed have an audit opinion of satisfactory to excellent (between 'Level 3' and 'Level 5').

There have been no internal audit reports issued this year where it was considered that the systems of internal control are poor (i.e. 'Level 1'). There were however six where we considered the framework to be weak ('Level 2'). They are as follows:

Not yet due for follow-up:

i) Direct Payments (Audit undertaken Feb/ March 2017)

There were found to be insufficient processes in place to ensure that excess Direct Payment contingency levels are identified and monies are recovered by the council in a timely manner. Also the processes were not robust to ensure action is taken to prevent re-occurrence

ii) School Meals (Audit undertaken Dec/ Jan 2017)

Assurance could not be provided that Free School Meal (FSM) applications were being completed accurately and within a timely manner, leaving a risk that schools will not receive pupil premium funding for children that are entitled to FSM.

Followed-up and implemented:

iii) Employment Procedures (Audit undertaken Dec/ Jan 2017)

Weaknesses were identified with the Reference and DBS check policy and process, and with the recovery of overpayments made to staff.

Followed-up and implemented:

iv) Repayment of Training Fees (Audit undertaken Nov/ Dec 2016)

There is no single system in place which provides a definitive list of all individuals who have had qualifications/ professional training funded by the council, so that it can be identified if any repayment is due upon leaving the council's employment.

The recommendation made in this respect is due for implementation, but as yet is still outstanding. Please refer to section D of this report for details.

To be followed-up in specific audits in 2017-18:

v) Highways Network Asset Management (Audit undertaken Feb/ Mar 2017)

The review was undertaken to provide assurance on the adequacy of the framework of risk controls in relation to the accurate recording, measuring and classifying of the Council's highways network assets in accordance with the Code of Practice on Transport Infrastructure Assets ('The Transport Code') and the Code of Practice on Local Authority Accounting in the United Kingdom ('The Code').

The review identified that the asset management systems / databases for carriageways, footways and cycleways, and structures are not sufficiently complete and up to date.

However, since the completion of this audit, CIPFA have now decided not to proceed with the introduction of these requirements.

vii) Webber Bus - Concessionary Fares (work undertaken throughout 2016-17)

This accuracy of the amounts invoiced by bus companies (via South Gloucestershire Council), and subsequently paid, was examined. Overall we assessed that assurance could not be provided in ensuring that amounts invoiced and paid were accurate, primarily due to the lack of data supplied by the bus companies to South Gloucestershire Council to allow them to reconcile the charges.

Action has already been taken which, if maintained and actioned regularly, should prevent future overpayments and reduce the risk exposure. This will be confirmed as part of the planned 2017-18 internal audit review.

F) INVESTIGATIONS/ WHISTLEBLOWING

The service has undertaken two new investigations during the year and continued work on four further investigations carried over from the previous year..

One investigation is currently with the Crown Prosecution Service. The CPS have asked the Police for some additional information before a charging decision is made. In turn the internal service are working with Senior Management in the relevant directorate to facilitate this request and assist the Police.

The other investigations, whilst in some cases serious in a specific area, have not identified any significant failures in internal control or systemic issues with the Council's systems of governance. The Committee can also take assurance that the 2016/17 audit plan included coverage of areas where investigations had taken place in previous years. This approach has been replicated in the 2017/18 plan.

G) UNPLANNED AUDITS

Five pieces of audit work have been requested by management that were not in the original plan. These requests were due to need for immediate assurance, and as such could not wait for inclusion in the 2017/18 audit plan.

The total amount of time spent on unplanned audit work was approximately 75 days. This is an increase on previous years, and is reflective of the increasing need to act flexibly to the demands and changes within local government.

It should be noted that all unplanned work was completed by the year end.

2.1. JOINT WORKING WITH BATH & NORTH EAST SOMERSET COUNCIL

The committee has been updated regularly on the joint working arrangements of Audit West (North Somerset Council Internal Audit Service and Bath and North East Somerset Council) with the last update being in December 2016.

Joint working has continued to be very successful, with over 25% of the 2016/17 audit plan involving joint reviews with BANES on common areas. Productivity and value continue to improve as the partnership develops, with joint working also taking place across investigations and non-core services.

Financially the arrangements continue to deliver savings both in this current year and throughout the lifetime of the contract.

2.2. CONTINUOUS PROFESSIONAL DEVELOPMENT

Training and development for all staff has continued to be a priority for the service. Team members continue to attend all local audit networks, national events (such as the Academies Roadshow) and have also attended various Institute of Internal Auditors training events in 2016-17.

Two of the team have been furthering their professional development and are working towards qualification in IIA (Audit) and ACCA (Accounting). They have successfully passed all exams to date and expect to be qualified within the next 12 months.

Partnership meetings continued to take place on a quarterly basis. These are key to promoting partnership-wide information and the further integration of staff.

2.3. NON-CORE SERVICES

In addition to delivering the Audit and Assurance Plan, Audit West provided a range of other functions which are not part of the core delivery of services to the council.

An increased focus on chargeable work has delivered the additional revenue support to our own savings plans. These main income generating services include:

- i) Business Continuity for other Councils and in Schools/ Academies**
- ii) Audit/ Responsible Officer Service in Academies**

iii) Business Rates Reviews for other Councils

iv) Financial Assessments

This year, Audit West was also contracted to supply 15 days of Internal Audit service on behalf of Liberata, to support their contract with Worcestershire County Council.

Audit West also started providing training sessions to Schools, Care Homes and Parish Councils on Information Governance and 'readiness' briefing sessions for the new General Data Protection Regulation (GDPR), which have been very successful.

Further added value pieces of work also included assisting the Council with its Business Continuity arrangements after a serious power outage at one of its offices (see 2.6), and assisting with an employment tribunal.

2.4. RISK MANAGEMENT

The Council's approach to risk management is described in the Risk Management Strategy. The Audit Committee has received updates which have been primarily focussed around the Corporate Risk Register, the last being in December 2016. Specific focus within this meeting was made around the Transformation Programme and the approach to Procurement and Commissioning.

The Council's Risk Registers remain highly dynamic as a consequence of the rapidly changing environment in which the council operates.

2.5. COUNTER FRAUD

The Partnership has continued to identify and assess the fraud risks that both North Somerset Council and B&NES face.

The Counter Fraud Action Plan was updated for 2016-17 and was designed to align the Counter Fraud work at both NSC and B&NES.

Work continued to be focused around aligning policies and procedures and also ensuring that staff received appropriate training and information to enable them to identify and report any suspicions of irregularity/fraud.

The Counter Fraud Strategy is updated annually and an updated version which includes the Counter Fraud Action Plan for 2017-18 is presented as a separate agenda item.

2.6. BUSINESS CONTINUITY

Audit West continued to assist with the Council's Business Continuity arrangements. Key risks identified in 2016-17 included ensuring that key external contractors had sufficient business continuity arrangements, and risks around the failure of IT/ power.

In respect of the latter, a serious power outage occurred at the Council's Castlewood offices in February 2017. The power outage itself was outside the council's control, but during the incident the back-up power systems on-site were affected and required repair and maintenance. The incident caused ICT downtime.

A decision was made to undertake urgent repairs, and at the same time, install a new Uninterruptable Power Supply (UPS) unit to increase the resilience of the

building for the future and in turn strengthen the Council's business continuity arrangements. This incident and repairs required significant input from internal audit, including providing officer availability over the weekend. The work was undertaken successfully with no further issues.

Audit West continued to share best practice in Business Continuity Planning having developed and exercised Business Continuity plans in the majority of Schools across North Somerset and BANES since October 2014. Ongoing maintenance and review was also completed to ensure they are kept up to date. In 2016-17, this work was also successfully extended out to the Care (Nursing Home) sector.

2.7. FORMAL OPINION ON THE INTERNAL CONTROL FRAMEWORK

As part of their statutory requirements the Head of Audit & Assurance is required to give an opinion on the internal control framework. In forming this view I have considered the work of the Audit & Assurance function as well as consideration of the wider governance framework and performance of the council.

It is my opinion that at the current time the council's internal control framework and systems to manage risk are reasonable.

- Reasonable assurance can be provided over the council's systems of internal control, helping to ensure corporate priorities can be achieved;
- Agreed policies, Financial Regulations and Contract Standing Orders are broadly being complied with;
- Managers throughout the council are aware of the importance of maintaining adequate and effective governance arrangements;
- Appropriate arrangements are operated to deter and detect fraud and investigations did not identify any systemic failures;
- There were no fundamental system failures or control breakdowns to business critical functions;

The continued reduction on council budgets places further pressure on all services to respond and manage risk in a proportionate way as identified within the Annual Governance Statement. The Audit Committee's support in ensuring this balance and maintaining effective corporate governance is appreciated and I would like to thank all members of the committee for their input and guidance over the past year.

3. CONSULTATION

The Annual report refers to facts and opinions that have been included within individual Audit Reports that have been distributed to, and agreed with, senior managers. The Audit Committee has received updates during the year of progress made in delivering the plan. The service meets regularly with the directorates to update them on the audit plan and ensure the plan continues to reflect the risks.

4. FINANCIAL IMPLICATIONS

There are no direct financial implications from this report which is focussed on performance.

5. RISK MANAGEMENT

Significant risks to the council arising from an ineffective Internal Audit service include lack of internal control, failures of governance and weak risk management. Specific risks include supplementary External Audit Fees and undetected fraud. The Internal Audit Service assists the council in addressing its risk profile. Internal Audit helps by identifying risks, improvement areas and by institutionalising good practice.

6. EQUALITY IMPLICATIONS

Embedded within the audit process is consideration of compliance with statutory guidance and regulations which includes those relating to equality and diversity.

7. CORPORATE IMPLICATIONS

Failure to deliver the agreed Annual Assurance Plan may result in an inability to provide adequate assurance to officers, members and the public of the soundness of the council's corporate governance.

8. OPTIONS CONSIDERED

None, this is an annual report.

AUTHORS

Jeff Wring - Head of Audit West

jeff.wring@n-somerset.gov.uk

Peter Cann – Audit Manager (Audit West)

peter.cann@n-somerset.gov.uk

BACKGROUND PAPERS

Audit Committee Report March 2016 – Annual Audit Assurance Plan 2016/17

Update Performance Report Dec 2016

Appendix A - Audit Opinion:

Assurance Rating	Opinion
Level 5	The systems of internal control are excellent with a number of strengths and reasonable assurance can be provided over all the areas detailed in the Assurance Summary
Level 4	The systems of internal control are good and reasonable assurance can be provided. Only minor weaknesses have been identified over the areas detailed in the Assurance Summary
Level 3	The systems of internal control are satisfactory and reasonable assurance can be provided. However there is one area detailed in the Assurance Summary which requires improvement and specific recommendations are detailed in the Action Plan
Level 2	The systems of internal controls are weak and reasonable assurance could not be provided over a number of areas detailed in the Assurance Summary. Prompt action is necessary to improve the current situation and reduce the risk exposure
Level 1	The systems of internal controls are poor and there are fundamental weaknesses in the areas detailed in the Assurance Summary. Urgent action is necessary to reduce the high levels of risk exposure and the issues will be escalated to your Director and the Audit Committee

Appendix B - Recommendations not implemented at follow-up

Report Name	Finding	Risk	Recommendation	Management Comment	Auditor Update
Repayment of Training Expenses	<p>Currently there is no system in place to record and/or identify staff that have received supported training for professional qualifications.</p> <p>The system is fully reliant on managers passing information over to HR and in the event of staff leaving prior to the stated period, identifying this on the Leavers Form. This has been proven not to be working, from cases identified by HR where expenses have not been repaid.</p>	<p>With no system in place to ensure that supported training is known and recorded, there is a high risk of the money not being recovered in the event of the staff leaving within the time period.</p> <p>Without compliance to the policy and recovery of training expenses, there is no incentive for staff to remain with the council after completing courses and therefore the money spent on training is not benefitting the council in the long term.</p>	<p>HR need to discuss and agree a new system to ensure that all supported training is known and recorded. This could be achieved by centralising the training budgets and by implementing the 'L and D' module on iTrent.</p> <p>The policy should then be updated to reflect the new process and both the new policy and process implemented and promoted to all staff. Consideration should also be given to ensuring that the agreement is attached to the policy, to prompt staff and managers to complete it at the outset. This could be a two part form; for the employee to make the initial request, detailing why they believe it would be of benefit and signing that they agree to the conditions of the policy if the request is approved, followed by the approval from the manager confirming that they have notified both payroll and HR.</p> <p>It is appreciated that this may take some time and therefore in the meantime, ,</p>	<p>Management response from original audit: <i>Agreed.</i> <i>Initial action; The policy will be reviewed and updated, and targeted bulletins sent to Managers.</i> <i>Implementation date: 31st December 2015</i> <i>We will also establish whether the 'L and D' module on iTrent can be implemented and used for this function.</i> <i>It will be discussed with the Head of HR and Performance and escalated to CMT to establish whether the centralisation of budgets is the appropriate way to tackle this problem.</i> <i>The Service Leader of Learning & Development has also recently identified the 'National Minimal Data Set for Social Care now held by the Business Intelligence Team which she can use to start identifying those that have been given training.</i> <i>Implementation Date: April 2016</i> <i>Responsible Officers:</i> <i>Su' Turner, Corporate HR Manager</i> <i>Carolyn Hills, Service Leader of Learning and Development</i></p> <p>Management response from recent audit: <i>The new process has been put on hold during the training freeze. It is possible that it will be reinstated once the training freeze has been lifted.</i> <i>There is currently no end date for the training freeze.</i> <i>The Leaver Form has a tick box for managers to inform Payroll</i></p>	<p>This recent audit found; <i>There is still no one system in place which covers the whole council and provides a definitive list of all individuals who have had qualifications/professional training funded by the council.</i> <i>Although work has been completed to investigate the viability of implementing the recommendations/ agreed actions from the previous year's audit, the centralisation of training budgets was not felt to be feasible.</i> <i>In the future this may be addressed by the implementation of a training freeze. As part of that initiative, the One Council Board and People Strategy Board have agreed that all training requests should be processed via the Service Leader for Learning and Development.</i> <i>However, this will not identify those staff who have already completed or currently undertaking professional</i></p>
Pensions Data Submissions	<p>The Iconnect system is not operating as anticipated due to difficulties with integrating the Iconnect system and Itrent.</p>	<p>Management is not currently receiving the anticipated benefits from using the IConnect system. The manual manipulation of the information occupies a significant amount of officer time, increases the risk of mistakes and errors occurring and can result in delays of the submission of the data to the pension fund.</p>	<p>Management should continue to work with the pension provider to identify solutions to increase the automation and reduce the amount of manual intervention in the process.</p>	<p>Management will continue to work with the pensions provider to identify solutions.</p>	<p>Ongoing. A report has been produced by midland the software provider. This will reduce the manual intervention once it is operational. The report is not yet complete and is currently being tested, it still required some tweaks.</p>

Report Name	Finding	Risk	Recommendation	Management Comment	Auditor Update
Members code of conduct	<p>From reviewing the Members Code of Conduct document, it was noted that it does not reference how gifts and hospitality received by Members should be recorded and the Auditor was unable to evidence that there was a register in place for Members to log any gifts or hospitality received. However, there is a separate Anti-Fraud and Corruption Policy within the Constitution (page 144) which includes reference to gifts and hospitality.</p> <p>Following further investigation, the Auditor located a copy of the 2007 Code of Conduct, which documented the requirement to declare gifts and hospitality over £25 and evidence of a previous gifts and hospitality register. The Auditor also reviewed 5 other Local Authority Member's Code of Conduct which documented reference to declaration of gifts and hospitality.</p>	<p>If the Member code of conduct does not document processes for recording gifts and hospitality, there is a risk is that gifts and hospitality may not be recorded and this could bring the transparency of Member activity into question.</p>	<p>The Members Code of Conduct should be amended to include acceptable procedures and values for the receipt of gifts and hospitality. A register should also be set up to record any declarations made.</p>	<p>The Members Code of Conduct should not be reviewed in isolation. Previously the Code of Conduct has dealt with gifts etc. but this was changed and as this report details the intention was to deal with member gifts and hospitality within the Anti-Fraud and Corruption Policy. This has not happened. As the Constitution stands Members would look to the Anti-Fraud Policy for guidance on gifts as that is where it is stated that the topic will be dealt with. If it is intended to amend that so that the topic is covered in the Code of Conduct rather than the Anti-Fraud Policy both should be changed to avoid ambiguity.</p> <p>Anti-Fraud Policy to be reviewed followed by Code of Conduct (if required)</p> <p>Responsible: Head of Finance and Property and Head of L&DS</p> <p>Time: For next review of Constitution at the 2017 Annual Meeting</p>	<p>Was going to be taken to full council meeting. Not included on the agenda/minutes for either Jan or Feb meetings (checked).</p>
Transformation Programme Review	<p>Programme Tracker</p> <p>The new reporting tool does not provide adequate information to all stakeholders. It does not record financial costs and savings, or a comparison between planned and actual start and end dates for all projects.</p> <p>It is acknowledged that the tracker is new and still under development.</p>	<p>Stakeholders are not aware of important information relevant to individual projects.</p>	<p>Develop the tracker to include financial costs and savings with the ability to track whether these meet the original Project Initiation Documents (PID).</p> <p>Include a comparison for planned and actual start and end dates for all projects.</p>	<p>There has been development on the financial reporting side of the Transformation Programme.</p> <p>Monthly meetings are held with Corporate Accountancy Manager to ensure correctly reported figures are provided to CMT on a quarterly basis.</p>	<p>Being followed up as part of 2016/17 audit - this has not been implemented therefore raised again.</p>