

## Regulatory and Other Committee

<b>Open Report on behalf of Pete Moore, Executive Director for Finance and Public Protection</b>
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Report to:	<b>Audit Committee</b>
Date:	<b>24 November 2014</b>
Subject:	<b>Work Plan</b>

### Summary:

This report provides the Committee with information the core assurance activities currently scheduled for the 2014/15 work plan.

### Recommendation(s):

1. Review and amend the Audit Committee's work plan ensuring it contains the assurances necessary to approve the Annual Governance Statement 2015.
2. Consider the action plan designed to improve the effectiveness of the Committee and approve the way forward / delivery of the actions.

### Background

1. The work plan has been pulled together based on the core assurance activities of the Committee as set out in its terms of reference; best practice and the outcome of the recent workshops (see Appendix A).
2. There was also number of actions identified at the workshops where the Committee felt there were opportunities to improve. We have started to record these in the attached action plan – Appendix B.
3. Appendix C provides a check list to help the Committee to monitor its work plan against its terms of reference.

### Matters arising from the last meeting

4. At the last meeting there was a number of areas where the Committee asked for further assurance information around internal audit reports, namely:-

*Debtors*

Debtors was reviewed as part of the 2013/14 Audit Plan. Our report gave limited assurance and we identified 6 high level findings and recommendations and 5 medium priority items to be addressed.

We have followed up the report with the appropriate manager and assurances have been that the high and medium level recommendations are being implemented.

In particular, there is progress against the issues identified relating to Adult Care debt. It is clear that engagement and communication between Adult Care finance officers and Mouchel Debtors team has improved since the review, with regular meetings taking place to discuss specific issues and promote understanding of each other's priorities.

A Task and Finish Group is also now meeting on a regular basis to guide improvement work in this area.

We will continue to closely monitor progress against the recommendations to ensure improvements continue to be made.

### *Domestic Violence*

You asked for a briefing paper on progress with the actions taken to address findings of the Domestic Violence Audit so that you are able to give a verbal update to audit committee. We followed these up with Children Services - safeguarding lead who confirmed that 6 of the 7 agreed actions have been implemented.

The outstanding action has an agreed completion date of 31<sup>st</sup> August 2014 – We recommended that Domestic Abuse training should be included in the Domestic Abuse policy – this has now been done, but the policy has needs to be approved by Director Management Team.

In brief other actions taken to address findings are:

- Overdue actions relating to MARAC on the MODUS system have been cleared and this is now closely monitored to ensure that actions take place within the 5 day agreed timescale for these high risk cases.
- All team managers have identified children's services representatives and reinforced the need for MARAC meetings to be prioritised and contingency representatives have been identified if needed.
- Domestic abuse now forms part of the induction process for social workers. The Domestic Abuse County Lead has delivered specific training sessions on domestic abuse this year as well.

- Training sessions on domestic abuse and briefing sessions on the role of MARAC and completion of DASH risk assessments have been conducted. Going forward training in these areas are now maintained via the staff induction process and 1:1 sessions.
- All Customer Service Centre advisors were registered for E-Academy learning for Domestic Violence in August and completed training that month. The only exception are the new starters who are doing this (and DPA , safeguarding etc.) as soon as possible during their training.
- Completion of Domestic Abuse and other courses are now all recorded on individual staff training records. Advisors returning from sickness /maternity leave are scheduled for the training as soon as possible.
- Issues with the recording of supervision records on ICS have been addressed via action plans across all teams. The Performance Management Team also provides reports to senior managers on the supervision records within ICS.

## Conclusion

4. The work plan helps the Committee ensure that the Committee effectively delivers its terms of reference and keep track of areas where it requires further work and/or assurance.

## Consultation

### a) Policy Proofing Actions Required

n/a

## Appendices

These are listed below and attached at the back of the report	
Appendix A	Work Plan to March 2015
Appendix B	Action plan
Appendix C	Terms of Reference

## Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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