



# Dorset County Council

## Report of Internal Audit Activity

### Plan Progress 2018/19 – January 2019

Internal Audit ■ Risk ■ Special Investigations ■ Consultancy

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## Executive Summary

The Assistant Director is required to provide an annual opinion to support the Annual Governance Statement.

As part of our plan progress reports, we will provide an ongoing opinion to support the end of year annual opinion.

We will also provide details of any significant risks that we have identified in our work, along with the progress of mitigating previously identified significant risks by audit.



### Audit Opinion and Summary of Significant Risks

#### **Audit Opinion:**

Audit reviews completed to date, highlight that in the majority of areas, risks are reasonably well managed with the systems of internal control working effectively.

#### **Significant Risks:**

Since our last report in October no further significant risks have been identified.

As part of our last report a significant risk was identified in relation to **DBS checking** when our audit findings led us to issue a '**no assurance**' opinion. Since our last update we have undertaken a follow up audit where we have provided a revised assurance opinion of '**reasonable**'. The full follow up report is attached as an **Appendix** to this report and looks to reassure stakeholders that significant progress has been made towards the implementation of the recommendations raised.

As such, we no longer consider this to be a significant risk to the Council and would commend Human Resources staff and County Leadership Team for the focus that has been given to this important area. We still maintain a degree of concern around the process of ensuring DBS checking of volunteers, although we are reassured by the additional work undertaken by HR to establish the levels of use of volunteers across the Council. Further details can be found in the full follow up report.

We do not propose any further audit assurance work in relation to DBS checking during the final months of Dorset County Council, however this important area will be included in the audit plan for 2019-20 for the new Dorset Council to ensure that control has not been diminished.

### Added Value

**'Extra feature(s) of an item of interest (product, service, person etc.) that go beyond the standard expectations and provide something more while adding little or nothing to its cost.'**



### Added Value

SWAP strive to add value wherever possible i.e. going beyond the standard expectations and providing something 'more' while adding little or nothing to the cost.

During this year SWAP have added value through the circulation of industry bulletins and fraud prevention alerts wherever possible. We also share the outcomes of any benchmarking undertaken across our SWAP Partner base. SWAP also aim to share the results of emerging areas of risk, or findings from relevant audit reviews undertaken at our Partners, to enable the sharing of best practice and comparison of common findings.

Since our last update we have provided data from a full staff survey on awareness and knowledge around whistleblowing along with benchmarking data from across SWAP partners to compare Anti-Fraud and Corruption Policy and Strategies. SWAP have also committed to provide a working protocol with the new Dorset Council for Fraud and Whistleblowing investigations along with National Fraud Initiative work.

As well as the above, we have continued to make available to DCC detailed analysis of expenditure, in order to identify potential duplicate payments. This is proving to be a valuable and worthwhile exercise which will continue to be ongoing. Data is currently being refined in order to identify the value of duplicate payments recovered directly as a result of SWAP's work in this area.

SWAP has provided support to the Shadow Dorset Council in undertaking three reviews of Shaping Dorset Council (SDC) programme governance, and a Gateway review, that have been reported to the Shadow Overview and Scrutiny Committee and the Shadow Executive Committee. The following reviews have been completed to date:

- [SDC Programme Audit – Programme Governance Review](#)
- [SDC Programme – Programme Governance Follow up](#)
- [LGR Programme – Further Programme Governance Review](#)
- [LGR Programme – Gateway 1 review](#)

SWAP is currently scoping and preparing to commence a second Gateway review.

## Internal Audit Plan Progress 2018/19

The Executive Director for SWAP reports performance on a regular basis to the SWAP Management and Partnership Boards.



### SWAP Performance

SWAP now provides the Internal Audit service for 26 Partners as well as many subsidiary bodies. SWAP performance is subject to regular review by both the Board and the Member Meetings. The respective outturn performance results for Dorset County Council for the 2018/19 year (as at 3 January 2019) are as follows:

Performance Target	Performance
<b><u>Audit Plan – Percentage Progress</u></b>	
Completed	56%
Work at Report Stage	4%
Fieldwork	17%
Scoping	7%
Not yet Started	16%
<b><u>Quality of Audit Work</u></b>	
Overall Client Satisfaction <i>(did our work meet or exceed expectations, when looking at our Communication, Auditor Professionalism and Competence, and Value to the Organisation)</i>	99.7%
Percentage of SWAP staff qualified or working towards a qualification	100%
<b><u>Outcomes from Follow Up Audit Work</u></b>	
Percentage of Priority 1&2 recommendations for partial assurance audits, that remain outstanding when the follow up audit is undertaken	10 % (2 of 20)
Value to the Organisation <i>(client view of whether our audit work met or exceeded expectations, in terms of value to their area)</i>	100%

## Internal Audit Plan Progress 2018/19

### Approved Changes:

**We keep our plans under regular review so as to ensure that we are auditing the right things at the right time**



### Changes to the Audit Plan

Since the approval of the annual internal audit plan there have been certain changes. This had been due to emerging risks that have been deemed higher priority, or where the service has stated that an audit would not add sufficient value at this time. The changes have been summarised below together with an explanation of the reasons for the change:

#### Audits removed from the original 2018/19 audit plan since our update report in October

- No audits have been formally removed since the last report however the committee will be aware of the discussion at the October Audit and Governance meeting around a request from the Director for Children's Services to remove the following two reviews:
  - **Readiness for Ofsted Inspection** – *to provide assurance on the effectiveness of targeted Ofsted preparation work*
  - **Children's Social Care caseload management** – *following the investment of £1M to recruit additional Social Workers with the aim of reducing caseloads and making Dorset an attractive work environment for social care staff – To evaluate the success of this initiative and the mechanisms in place to ensure caseloads remain at manageable levels*
- In addition, there have been delays to the commencement of the following Children's services review:
  - **Fostering** – *to evaluate the success of the initiative to increase the number of in-house foster carers, imperative to the reduction in the numbers of expensive placements for looked after children*

Whilst the above audits have been requested to be removed or the start of the audit has been delayed, SWAP is of the opinion that these are valuable reviews and should be progressed.

#### Audits substituted to replace the reviews above and new audits added to plan

- **Contract Overspends**  
This audit was added to the plan following a concern over a potential lack of overview of contract overspends

## Monitoring of Previously Reported Significant Risks

### Summary of progress in mitigating previously reported Significant Risks

Audit Title	Significant Audit Findings	Dates of Implementing Key Actions Agreed by Service	Progress in Implementing Agreed Actions
Use and Management of the High Needs Block	<p>There are issues with the quality of data within Synergy which may impact on the service's ability to accurately track and project future demand on the HNB.</p> <p>If initiatives to reduce reliance on Independent Sector placements are not progressed promptly with estimated savings revisited regularly for feasibility as more detail becomes known, there is a risk that they may not be achievable, resulting in an increase in the cumulative deficit of the High Needs Block budget.</p>	All actions are planned to be completed by the end of July 2018	A follow up review is currently being undertaken to confirm progress against the recommended actions.
DBS checking	<p>Job roles have been incorrectly assessed as not requiring a DBS check and employees have been found to be working in regulated roles without a DBS clearance.</p> <p>There are instances of employees working in positions where a DBS clearance is required, and information has been returned on the check, however there is no evidence that a risk assessment as to the individual's suitability to be employed, has been carried out.</p> <p>Audit testing identified examples where it was not possible to evidence completion of a risk assessment prior to staff starting without a DBS clearance having been received.</p>	All actions were planned to be completed by 31 October 2018	<p>Our most recent follow up review confirmed that all, but two recommendations were complete, with the other two in progress with completion dates by 31 December 2018.</p> <p>We have now followed up the status of these two remaining recommendations and it is reassuring to report that both recommendations have now been confirmed as completed.</p> <p>In relation to the DBS checking of volunteers, we are reassured by the additional work undertaken by HR to establish the levels of use of volunteers across the Council, as well as enhanced guidance/ communication in this area. In addition, benchmarking of DCC's approach to DBS checking of volunteers with other Local Authority's, has demonstrated broadly similar approaches.</p>

## Monitoring of Previously Reported Significant Risks

Audit Tittle	Significant Audit Findings	Dates of Implementing Key Actions Agreed by Service	Progress in Implementing Agreed Actions
	<p>Without maintaining a central record of volunteers, the Authority is unable to ensure that a DBS check is undertaken in every appropriate instance prior to volunteer work commencing.</p>		<p>Therefore, although there remains a degree of risk, DCC have demonstrated that their management of this risk is not unreasonable and has been adequately considered in the context of the existing controls.</p> <p>Therefore, previously reported significant risks are now considered to be adequately mitigated.</p>
<p>Governance Framework for Tricuro</p>	<p>The council does not currently receive copies of minutes of Tricuro’s Audit, Governance and Risk Committee and therefore has limited assurances around the adequacy of review of operations within Tricuro.</p> <p>Tricuro have not provided regular performance or financial data to the council.</p> <p>Performance data that has been provided indicates poor performance in some areas.</p>	<p>All actions were due to be implemented by 1 October 2017</p>	<p>Further follow up work has now been completed and has confirmed that the recommendations contained within the original report have been adequately implemented.</p> <p>Therefore, previously reported significant risks are now considered to be adequately mitigated.</p>



## Internal Audit Work Programme – 2018-19

At the conclusion of audit assignment work each review is awarded a “Control Assurance”, a summary of the assurance levels is as follows:

- Substantial – Well controlled and risks well managed.
- Reasonable – Adequately controlled and risks reasonably well managed.
- Partial – Systems require control improvements and some key risks are not well managed.
- None – Inadequately controlled and risks are not well managed

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major ↔ 3 = Medium		
						Recommendation		
						1	2	3
<b>Completed Work for Dorset County Council</b>								
Governance	Coach tender investigation and advice work	1	Final	Advice and Guidance	N/A	-	-	-
Grant Certification	Growth Hub	1	Final	Advice and Guidance	N/A	-	-	-
Grant Certification	Dorset Families Matter	1	Final	Advice and Guidance	N/A	-	-	-
Operational	Budget Management	1	Final	Advice and Guidance	N/A	-	-	-
Operational	Potential Duplicate payments	1	Final	Advice and Guidance	N/A	-	-	-
Follow up	Learning Disability	1	Final	N/A				
Follow up	General Data Protection Regulations	1	Final	N/A				
Operational	Management of Grants	1	Final	Reasonable	3	-	-	3
Operational	Family Partnership Zones	1	Final	Partial	5	-	2	3
Operational	Contract Management – Construction and Transport	1	Final	Reasonable	4	-	1	3
Operational	Deferred Payments	1	Final	Partial	5	-	3	2

## Internal Audit Work Programme – 2018-19

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major ↔ 3 = Medium		
						Recommendation		
						1	2	3
Follow up	ICT Contract Management	1	Final	N/A				
Operational	Dorset Care Framework	1	Final	Partial	10	-	8	2
Operational	Capital Budget Management	1	Final	Substantial	1	-	-	1
Operational	Mental Health Act	1	Final	Advice and Guidance	N/A	-	-	-
Follow up	Education of Looked After Children	2	Final	N/A				
Operational	Statutory Timescales for Children's Assessments	2	Final	Partial	5	-	3	2
Follow up	Resilience of ICT Infrastructure	2	Final	N/A				
Follow up	Children's Services Budget Management	2	Final	N/A				
Operational	Implementation of Our People Plan	2	Final	Advice and Guidance	N/A	-	-	-
Operational	DBS checking	1	Final	None	8	5	2	1
Operational	Dorset Waste Partnership – Value for Money	1	Final	Advice and Guidance	N/A	-	-	-
Operational	Durlston Country Park	2	Final	Partial	8	2	5	1
Operational	Whistleblowing	1	Final	Partial	8	-	5	3
Operational	Adult and Community Services Debt Management and Debt Recovery	1	Final	Partial	3	-	3	-
Operational	Budget Assumptions	1	Final	Reasonable	1	-	1	-

## Internal Audit Work Programme – 2018-19

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major <span style="font-size: small;">↔</span> 3 = Medium		
						Recommendation		
						1	2	3
Operational	Deprivation of Liberty	2	Final	Reasonable	2	-	-	2
Operational	Wool Primary School	3	Final	Reasonable	13	-	1	12
Follow up	Tricuro Governance Arrangements – Follow up	3	Final	N/A				
Operational	Duplicate Payment Run advice work	2	Final	N/A	4	-	-	4
Follow up	Children’s Services Contract Monitoring Arrangements	3	Final	N/A				
Operational	Achievement of Savings Targets	2	Final	Partial	2	-	-	2
Follow up	DBS checking	3	Final	Reasonable	2	-	-	3
Operational	Cyber Security Firewall Management	2	Final	Reasonable	15	-	5	10
Operational	National Fraud Initiative Governance Arrangements	1	Final	Advice and Guidance	N/A			
Follow up	Committee Structure	3	Final	N/A				
Follow up	Corporate Working Groups	3	Final	N/A				
Operational	Key controls - reconciliations	3	Final	Substantial	1	-	-	1
<b>Completed work for Shadow Dorset Council</b>								
Operational	Governance of Shaping Dorset Programme	1	Final	Partial	5	-	5	-
Follow up	Governance of Shaping Dorset Programme	1	Final	N/A				


## Internal Audit Work Programme – 2018-19

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major <span style="font-size: small;">↔</span> 3 = Medium		
						Recommendation		
						1	2	3
Operational	Governance of Shaping Dorset Programme	2	Final	Partial	7	-	7	-
Gateway Review	Gateway 1 review	3	Final	N/A	7	-	7	-
<b>Reporting</b>								
Operational	Fraud Detection	2	Draft					
Operational	Duplicate payment reporting	1-4	Draft					
Operational	Green Assets Strategy	3	Draft					
<b>In progress</b>								
Operational	Data Quality – Mosaic	2	Fieldwork					
Operational	Public Health - Livewell Dorset	2	Fieldwork					
Operational	Mosaic Post Implementation Review	2	Fieldwork					
Follow up	High Needs Block	3	Fieldwork					
Operational	Supplier Resilience	3	Fieldwork					
Operational	Role of the Dorset Manager	3	Fieldwork					
Operational	Equality Impact Assessments	3	Fieldwork					
Operational	Pension Fund Investments Transfer	3	Fieldwork					
Operational	Continuing Health Care	3	Fieldwork					

## Internal Audit Work Programme – 2018-19

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major <span style="font-size: small;">↔</span> 3 = Medium		
						Recommendation		
						1	2	3
Operational	Compliance with IR35	3	Fieldwork					
Operational	Public Health contract compliance	3	Fieldwork					
Operational	Risk Management	3	Fieldwork					
Operational	Contract Overspends	3	Fieldwork					
Operational	Portesham Primary School	3	Scoping					
Operational	Safeguarding in Dorset Schools	3	Scoping					
Operational	Property Maintenance Framework	4	Scoping					
Operational	DWP - Enforcement	4	Scoping					
Operational	ICT Key Controls	4	Scoping					
<b>Yet to Commence</b>								
Operational	Fostering		Pending start date from Director					
Operational	Children's Social Care Caseload Management		Pending requested removal					
Operational	Effectiveness of Social Care Practice		Pending start date from Director					

## Internal Audit Work Programme – 2018-19

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major  3 = Medium		
						Recommendation		
						1	2	3
Operational	Readiness for Ofsted Inspection		Pending requested removal					
Operational	Dorset Travel		Not started					
Operational	Local Enterprise Partnership		Not started					
Operational	Scheme of Delegation		Not started					
Operational	Staff Performance Management		Not started					
Operational	GDPR Compliance		Not started					
Operational	WAN Management		Not started					
Operational	Software Licensing		Not started					
Operational	LGR – Technology Convergence		Not started					

A copy of the full audit plan, including details of upcoming planned audit reviews, is available to view on ModernGov under the March 2018 Audit & Governance Committee



APPENDIX



# Disclosure and Barring Service (DBS) Checking

## Final Follow Up Report

Issue Date: 17<sup>th</sup> December 2018

Working in Partnership to Deliver Audit Excellence

## Executive Summary

Audit Objective	Updated Audit Assessment	Progress Summary					
		Complete	In Progress	Not Started	Risk Accepted	Total	
To provide assurance that agreed actions to mitigate against risk exposure identified within the Disclosure and Barring (DBS) Checking audit 2018/19 report have been implemented.	<b>Reasonable</b>						
	Based on the testing carried out as part of our follow up review, and the ongoing commitments provided as part of the management responses, we would offer an updated audit assessment of <b>Reasonable</b> in relation to the areas reviewed.	<b>Priority 1</b>	2	2		1	5
		<b>Priority 2</b>	2				2
		<b>Priority 3</b>	1				1
		<b>Total</b>	5	2	0	1	8

### Audit Conclusion

Since our original audit report was issued on 27<sup>th</sup> September 2018, significant progress has been made towards the implementation of the recommendations raised. HR staff should be commended for the focus that has been given to this important area.

We're encouraged by the positive progress made towards the implementation of recommendations raised within our original audit, however there is still work to be completed in some areas to ensure full implementation of the recommendations. Two additional recommendations have been raised as a result of the findings from this follow up review. These and details of the further work to complete can be found in the detailed action plan below. However, we are confident that given the current level of progress that full completion of the recommendations will be achieved with sustained focus.

We maintain a level of concern around volunteers, that the proposed actions, whilst going some way to help address these concerns, retain a degree of risk exposure as a result of not maintaining a comprehensive record of volunteers and their DBS statuses. As a result, it is not possible to be completely confident that all volunteers requiring a DBS check have received one. However, HR will be checking to ensure that for any volunteer where a DBS check has resulted in a declaration or positive check, that an appropriate risk assessment has been completed. This check is possible as a record of all volunteers who have been DBS cleared is available on the online DBS system. The first of these regular checks have been undertaken by HR and has highlighted three volunteers who had received a positive DBS check against volunteering roles which required a DBS clearance. Further investigation by HR identified that in two of the three instances the volunteer Childcare worker and Chaperone did not start in the voluntary positions. A third instance of a supported lodgings volunteer is currently being investigated by HR with the manager, to confirm that an appropriate risk assessment is in place. To assist the Council in any further considerations around tightening of controls around volunteers, SWAP are undertaking a cross-partner benchmarking exercise to establish how other Councils manage and monitor DBS clearances for volunteers where required. In order to prevent delay to issuing this report, we will report on the benchmarking exercise separately.



## Scope

Testing has been performed in relation to all priority 1 and 2 recommendations and supporting evidence obtained to support implementation of recommendations. Follow-up of the priority 3 recommendations is based on self- assessment by the responsible manager.

## Findings and Outcomes

### Objective

To assess the procedures and controls in place to ensure individuals are subject to appropriate DBS checking where relevant to their role in the Authority.

**1. Risk: The Authority fails to identify individuals unsuitable to work with vulnerable people, potentially leading to harm or detriment to the wellbeing of service users.**

### 1.1a Finding and Action

Issue	Recommendation	Priority 1
<p>Job roles have been incorrectly assessed as not requiring a DBS check. This has resulted in the appointment of individuals into posts classed as a 'regulated activity' with no DBS check carried out.</p>	<p>I recommend that the Service Director Organisational Development ensures that a review is undertaken of all job roles across the whole Council in order to confirm that the DBS status within DES has been correctly assessed and the appropriate level of clearance has been obtained. Where jobs are identified as having been incorrectly assessed as not requiring a check or the incorrect level of check has been applied, DBS clearance should be sought as a matter of urgency and appropriate precautions taken before and if necessary, after clearances are received (where DBS checks reveal potential concerns).</p>	<p><i>SWAP Ref. 39205</i></p>
<p><b>Management Response / Agreed Action (27<sup>th</sup> September 2018)</b></p>		
<p>A review of all job roles is already being undertaken across the council to confirm that the DBS status of roles within DES have been correctly assessed and that the appropriate levels of clearance have been obtained. This is being undertaken with each Directorate Leadership Team working with their HR Business Partner. This work has been completed within the Adult &amp; Community Services directorate and is well in progress across all other areas.</p>		

Where roles are found to have been incorrectly assessed, and the assessment means that either of the following apply:

- (a) the workforce checked is not appropriate for the role;
- (b) a barred list check has not been undertaken where it is a requirement to do so for the role;
- (c) the level of check undertaken has not assessed all of the criminal record information that the role demands.

We will require that managers:

- I. seek DBS clearance at the appropriate level of relevant staff as a matter of urgency;
- II. risk assess individuals in roles where no or the incorrect level of DBS checking has been carried out and take appropriate steps to address the risk in the interim, pending the outcome of the subsequent check;
- III. take action should the criminal records check outcome reveal concerns about individuals in their role.

The review of roles will be completed by the end of October, including initiation of the correct level of check. It should be noted that completion of the recommendation in full will be dependent on the time required to receive DBS check results (which Dorset County Council cannot influence) and compliance by managers with the requirements listed above.

Managers are also always asked to review that the level of check is accurate as they advertise vacancies in DES, and to consider the DBS status as they undertake PDR reviews; changes have been made to the PDR Mid-Year Review form to provide managers with access to information about DBS clearances. The data will allow managers to understand the DBS status of positions, identify when a DBS clearance has been completed or, more importantly, where a clearance is not recorded, and input dates when Risk Assessments have been completed. Data in DES is updated on a weekly basis to ensure that information from data sources such as the DBS e-bulk system is up to date. The changes to the PDR Mid-Year Review form have been communicated to all managers, including a reminder of the county council's expectations around ensuring DBS clearances are complete and up to date. This included a need for managers to review posts that do not have a DBS indicator on DBS, to ensure that this is correct and consistent with other similar roles.

### Summary of Progress

In Progress

A review of all job roles across the Council to confirm the DBS status of posts have been correctly assessed and the appropriate level of clearance has been obtained is currently being undertaken. Whilst the work is still ongoing in certain Directorates e.g. Adults and Community and Public Health, a number of changes to the DBS status of roles have been made following these reviews. To date, a total of 47 job roles across all Directorate areas have been changed from previously having no DBS requirement to now requiring one. In addition to this, 84 job roles have been changed from previously requiring a DBS check to no longer needing one. The work is on-going in this area and therefore, these figures are subject to change. As such, the recommendation will remain in progress until all job roles across the Council have been assessed to ensure the correct DBS status has been assigned and the appropriate DBS clearances have been undertaken for all employees.

In order to validate the work undertaken so far in relation to the review of job roles across the Council to confirm the DBS status of posts, a sample of 12 job roles were selected from a report which detailed all current employees and their respective DBS requirements. Job roles which we felt may require a DBS check were selected based on a number of factors. For example, by selecting from high risk Directorate / Service areas such as Children's and Adult Services. One job role for a Cleaner / Caretaker within Children's Services was found to have been incorrectly allocated as not requiring a DBS check (allocated an N/A DBS code). However,

the manager has assured HR that the individual had been DBS cleared to the correct level and that the issue was a result of an inaccurate record within DES. DES has now been updated to reflect the correct DBS code. All other employees reviewed were found to have been correctly assessed.

Performance Development Reviews (PDR) reviews have been revised to include information related to DBS clearances of employees. Managers are now required to input a risk assessment date. Information including the DBS status of a post and the date of last check is also available to managers for their consideration. Employees are also required to provide an annual declaration to confirm / disclose any changes to DBS status. Changes to PDR reviews were communicated to all staff via SharePoint. We did not undertake any testing to evidence that this change had been appropriately implemented by managers.

Revised Implementation Date	31/12/2018	Revised Responsible Officer	Service Director Organisational Development
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1.1b Finding and Action		
Issue	Recommendation	Priority 1
Job roles have been incorrectly assessed as not requiring a DBS check. This has resulted in the appointment of individuals into posts classed as a 'regulated activity' with no DBS check carried out.	I recommend that the Service Director Organisational Development implements a process to ensure that all newly created posts are assigned the correct DBS status in accordance with the DBS guidance and that the correct level of DBS check is undertaken.	SWAP Ref. 39212
Management Response / Agreed Action (27 <sup>th</sup> September 2018)		
<p>There is already a process in place requiring managers to assign the correct level of check to all newly created positions during the DES process to advertise a newly-created position. DES provides links to the SharePoint guidance to assist managers in making this decision. There are issues of clarity in guidance and understanding. To support managers, SharePoint guidance on the DBS process will be re-written to help ensure that going forward they are better equipped to assess the correct DBS status of posts. This will be undertaken by October.</p> <p>As an additional level of checking and process, the HR/Pay Support team staff sense-check the level of check that has been indicated by the manager during the DES process, and have a conversation with the manager should the level of check appear to be inconsistent. However, this does not displace the manager's responsibility to assign the correct DBS status. Detailed interpretation of the regulations is required in some cases where the legislation is not clear or the role is undertaking non-standard duties, and advice will need to be sought by the manager via the HR Helpdesk or the HR Business Partner.</p>		

Changes to roles within the HR/Pay team have been introduced from 1<sup>st</sup> August 2018 that sees the administration of DBS checks absorbed into the general HR/Pay Assistant role rather than sit with a standalone post. Not only does this remove any risk around single point of failure this also ensures that the administration of DBS clearances is more closely aligned with the broader recruitment process. This will lead to an improvement in the quality of spot-checking of the DBS status of posts as Assistants will be designated with a specific area of the county council to support, leading to a much-improved understanding of service areas and roles performed in each area.

There is also a standard process in place following submission of the manager's DES request which confirms the start date of the employee, whereby the HR Pay Support team reviews the status of the DBS check as they set up the employment record. Where the criminal check outcome is pending or not commenced, the manager is contacted and advised that a risk assessment must be undertaken pending clearance.

#### Summary of Progress

Complete

SharePoint guidance has been rewritten to help ensure that managers are better equipped to assess the correct DBS status of posts. The guidance is comprehensive and covers for example information on why a check is required and the levels of check available. Managers are also advised that HR support is available if required. Changes to the DBS guidance was communicated by the HR & OD Communications team to all staff in October 2018 via SWAY (an Office 365 communications application) and through the Manager Mail publication issued on 16<sup>th</sup> November 2018.

Changes to the roles within the HR/Pay team were introduced in August 2018. The changes see the administration of DBS checks absorbed into the HR/Pay team role. The HR/Pay team will provide advice and support for pre-employment clearances, including provision of access to the online DBS system, advice on DBS checks and countersigning of applications to the DBS for a check to be undertaken. In house DBS training has been completed by the HR/Pay team. Guidance has also been issued to the HR/Pay team in relation to new starters to ensure that a DBS check has been undertaken and/or a risk assessment where no DBS check has been received before an employee commences employment in a role which requires a check, or if a positive check has been returned. Guidance has also been issued to the HR staff in relation to the process for creating a new post which is subject to DBS requirement or amending an existing post which has a DBS requirement. Pre-employment check training with an external provider was also completed at the end of November 2018. The HR/Pay Support team have attended this training as well as Senior HR team members. It is hoped that these changes together with the training provided, and guidance issued, will lead to an improvement in the controls surrounding DBS checks. We were provided with recent examples of the HR/Pay Support team staff sense-checking and challenging the level of DBS check indicated by the manager during the recruitment process which has highlighted an increased awareness and understanding of DBS within the team.

Directors have been notified by the Monitoring Officer of the outcomes from original audit and the need for compliance at CLT on 23<sup>rd</sup> October 2018. It has been agreed that until the recommendations are implemented, this will remain a standing item on CLT agendas.

1.1c Finding and Action		
Issue	Recommendation	Priority 3
<p>Job roles have been incorrectly assessed as not requiring a DBS check. This has resulted in the appointment of individuals into posts classed as a 'regulated activity' with no DBS check carried out.</p>	<p>I recommend that the Service Director Organisational Development ensures that DBS guidance is reviewed to clarify any ambiguity and correct any errors.</p> <p style="text-align: right;"><i>SWAP Ref. 39206</i></p>	
<p><b>Management Response / Agreed Action (27<sup>th</sup> September 2018)</b></p>		
<p>To support managers in complying with their criminal records check responsibilities, SharePoint guidance on the DBS process will be re-written to help ensure that going forward they are better equipped to assess the correct DBS status of posts. An overhaul of the DBS e-learning modules has been completed and the revisions have been made available to learners from September. The revised e-learning module separates out the guidance around system use and the overarching DBS guidance. Feedback since the revised modules have been launched has been extremely positive.</p> <p>Following changes to the structure of the HR Pay Support team further in-house training is being provided to assist team members with their role in responding to first line queries relating to the level of DBS check required. The DBS status of posts can be ambiguous and if necessary, questions will be escalated to business partners to resolve in consultation with relevant service managers. Additional pre-employment check training by an external provider has also being arranged for late November.</p>		
<p><b>Summary of Progress</b></p>		<p><b>Complete</b></p>
<p>The revisions made to the guidance for managers to better assess the DBS status of posts together with the changes made to the HR/Pay team to better support DBS process has been discussed within 1.1b above.</p> <p>In addition to the above, DBS e-learning modules have been updated and were made available to managers at the end of August / early September 2018. A new module which covers a general overview of DBS regulations and what type of roles require a check has been launched. In addition to this, two existing modules which cover the DBS process within DCC have been revised. Before individuals can access the online DBS system, they must complete these modules and undertake an online assessment / test. There is a total of 153 active users to the online DBS system. As of 30<sup>th</sup> October 2018, 84 users who have access to the e-learning portal have completed the revised DBS modules. However, we cannot confirm how many of these users are also users of the online DBS system as the modules are available to anyone who has access to the e-learning portal. Therefore, an additional recommendation has been raised to ensure that all active users of the online DBS system complete the two new modules made available in relation to DBS.</p>		
<p><b>Additional Recommendation</b></p>		
<p>We recommend that the HR Service Manager - Operations ensures all staff who have access to the online DBS system complete the recently revised e-learning modules.</p>	<p style="text-align: right;"><i>SWAP Ref. 40124</i></p>	<p><b>Priority Score</b></p> <p style="text-align: center;"><b>3</b></p>

Agreed Action	Timescale	31/03/2018
	Responsible Officer	HR Service Manager – Operations
Agreed. We will identify system users who have not completed the new and/or revised modules and request that these users undertake the relevant modules within two months.		

1.2a Finding and Action		
Issue	Recommendation	Priority 1
Risk assessments for two existing employees with positive DBS checks could not be located within central records held by HR.	I recommend that the Service Director Organisational Development ensure that a review is undertaken of all positive DBS checks to confirm that a risk assessment has been undertaken in every instance for current employees. If it is identified in any instances that a risk assessment has not been undertaken, then this should be carried out as a matter of urgency.	SWAP Ref. 39208
Management Response / Agreed Action (27 <sup>th</sup> September 2018)		
<p>CLT has agreed to the funding of a review of all positive DBS checks to confirm that the appropriate service manager has undertaken a review in every instance for current employees (such a review involves production of a report from the DBS system, a matching exercise to the SAP record, pulling each hard copy personnel file to review the content for existence of the risk assessment form and a subsequent request to the manager to provide a copy where evidence is found not to be held centrally). It is hoped that additional resource to commence this piece of work will be in place by the end of September.</p> <p>The review will be undertaken and in any instance where a risk assessment has not been undertaken the relevant service manager will be required to undertake and act on the risk assessment.</p>		
Summary of Progress		Complete
<p>In early October 2018, a review of all current employees with a positive DBS clearance was undertaken to ensure that a risk assessment was in place for each of them. A total of 39 employees with a positive DBS check were originally identified. The HR team then checked each employee's personnel file to confirm the existence of a risk assessment. Where one could not be located, the employee's manager was contacted for a copy. In instances where a risk assessment was found not to have been completed, the manager was required to complete one. As of 31<sup>st</sup> October 2018, there were 14 employees in posts requiring a DBS check with a positive clearance where a risk assessment had not yet been completed or confirmed by their manager.</p> <p>Out of the 14 employees, no response had been received from management in relation to seven despite being engaged by HR Officers. The seven employees found not to have had a response back from management were reviewed to ensure there was evidence (e.g. email correspondents) to support that HR were actively</p>		

pursuing a response. Whilst we appreciate that there are circumstances where there may be delays in completing a risk assessment (e.g. when the manager is waiting to review a copy of the original DBS certificate which outlines the details of the positive return), we are concerned risk assessments are not being completed within a reasonable period of time. As such, a recommendation has been raised to address this issue for all future exercises currently planned to take place each month.

An update on the status of the risk assessments for the seven employees above was provided by HR on 3<sup>rd</sup> December 2018. HR confirmed that risk assessments have now been completed for all seven employees.

In addition to the above, a sample of 10 employees marked as having had risk assessments completed in the original report were checked to verify that a risk assessment was in place. In all 10 cases reviewed, a risk assessment was found to be in place.

### Additional Recommendation

We recommend that the HR service Manager - Operations ensures that any instances where requests for information from managers are not promptly actioned are escalated through appropriate channels.

Priority Score	2
Timescale	31/12/2018
Responsible Officer	HR Service Manager – Operations

### Agreed Action

We will introduce an escalation process which will notify the managers identified and give the manager a week to complete and return a risk assessment. When notified, if the employee is an individual in a regulated post, we will advise the manager that the employee cannot undertake regulated work unsupervised. If after that initial notification, no response is provided, we will give a further reminder which will copy in the manager's line manager as well as the HR Business Partner requesting a response be provided within a week. If we get no response from that, we will contact the manager's line manager directly by email, copying in the relevant Service Director, HR Business Partner and manager themselves advising that there is an urgent safeguarding issue that needs addressing. The HR Business Partner will raise the issue via DLT.

1.2b Finding and Action		
Issue	Recommendation	Priority 2
Risk assessments for two existing employees with positive DBS checks could not be located within central records held by HR.	I recommend that the Service Director Organisational Development ensures that a process is implemented to confirm that a completed and appropriately approved risk assessment is received by HR for all positive DBS checks where a decision is made to employ the individual concerned.	<i>SWAP Ref. 39207</i>
<b>Management Response / Agreed Action (27<sup>th</sup> September 2018)</b>		
<p>A monthly check will be introduced to ensure that a completed and appropriately approved risk assessment is received by HR for all positive DBS checks where a decision is made to employ the individual concerned, whether as a result of recruitment, or during a regular DBS re-check.</p> <p>HR Operations processes will be reviewed to ensure a copy of a risk assessment has been obtained as part of the onboarding process from managers whose responsibility it is to carry out DBS checks and assess the risks of employing in a particular role someone for whom a positive check has been disclosed.</p>		
<b>Summary of Progress</b>		<b>Complete</b>
<p>A monthly report from the online DBS system is produced which will identify employees with positive DBS clearances. If a risk assessment (for positive checks) has not been received, HR Officers will then chase managers until the risk assessment is received. A copy of the most recent report produced in October 2018 identified no new employees that HR weren't already aware of as not having a risk assessment (for positive checks) carried out. HR has undertaken an exercise specially in this area which focuses on bringing all records up to date by ensuring risk assessments have been completed for all individuals employed in post requiring a DBS check where a positive check has been returned. Details of this exercise has been detailed within 1.2a above.</p>		

1.3a Finding and Action		
Issue	Recommendation	Priority 1
The Council does not maintain a central record of DBS clearance of volunteers.	I recommend that the Service Director Organisational Development ensures that a list of volunteers across the Council is drawn up and arrangements made to check that an appropriate level of DBS clearance has been obtained for volunteers that are working in regulated or financial related activities.	<i>SWAP Ref. 39652</i>



### Management Response / Agreed Action (27<sup>th</sup> September 2018)

Directorates should already keep their own records of volunteers, the roles in which they volunteer, and the risk assessments undertaken to determine whether a DBS check is needed.

As these are records of volunteers in directorates, there are no central payroll and other personnel records which, HR Pay Support staff could use to validate and check against. This makes it essential that service managers keep accurate records of roles undertaken by volunteers to demonstrate how decisions on the need for DBS checking and the appropriate level have been reached.

HR Operations will prepare firm guidance on the importance of each directorate maintaining these records and undertaking necessary checks, and specifically about the essential requirements for any volunteer working in a regulated activity. Compliance and checking is though, a matter for managers who utilise the services of volunteers.

To help monitor compliance a periodic spot-check of clearances for volunteers that have indicated a positive check will be undertaken to ensure risk assessments have been completed by the engaging manager. The first spot-checking exercise will be completed by the end of October.

#### Audit Commentary

Whilst the proposed action outlined goes some way to help address the issue, at the time of the original audit, we were of the opinion that there was still a significant degree of risk exposure as a result of not maintaining a comprehensive record of volunteers and their DBS statuses. Therefore, the risk has been considered accepted.

### Summary of Progress

**Risk Accepted**

SharePoint guidance has been updated to highlight the requirement for managers to ensure a check on volunteers is undertaken and the importance of maintaining a register of volunteers. A template has also been produced and is available on SharePoint for managers to utilise in order to record a register of volunteers within their Directorate / Service area. Supplementary guidance related to volunteers which includes information related to the recruitment, training, expenses, insurance etc. of volunteers has also been made available to managers through SharePoint. Changes to the guidance in relation to volunteers was communicated by the HR & OD Communications team to all staff in October 2018 via SWAY (an Office 365 communication application) and through the Managers Mail publication in November 2018.

The Audit & Governance Committee requested information around the use of volunteers across the county council. HR colleagues have been able to establish that volunteers are used across certain teams within the county council to complement the workforce and support the delivery of services. Areas where volunteers are regularly used have been confirmed by the HR Service Manager - Operations as per below:

Directorate	Service / Activity
<b>Adults &amp; CS</b>	Trading Standards
	History Centre
	Libraries
	Registration
	Commissioned services
	Arts Development Company
	Popps (Partnership of people project)
<b>Children's Services</b>	Schools and Governors
	Family Partnership Zones
	Licensing Team
	Cedar House
	Music Service
	Dorset Syrian Resettlement Programme
	Post 16 /Enterprise
	Weymouth Outdoor Education Centre
<b>Environment and Economy</b>	
ICT	Superfast Dorset and digital champions
Greenspace	Clearing Rights of Way
	Cutting verges
	Admin
DWP	Litter Picking

Feedback obtained by the HR Service Manager - Operations from directorates indicated that in the vast majority of cases, volunteers are not engaged in work that would require DBS clearances. The type of work, levels of access to children or vulnerable adults and/or the levels of supervision in place influence the necessity for a DBS clearance to be in place. The HR Service Manager - Operations confirmed that where clearances are required, processes are maintained within each individual directorate, with records kept locally to monitor compliance.

A check of volunteers who have been DBS cleared will be undertaken on a periodic basis by HR to ensure that a risk assessment has been completed for any volunteers which have a positive DBS clearance. The check can be undertaken by HR as a record of all volunteers who have been DBS cleared will be available on the online DBS system. However, the onus is on managers enlisting the services of a volunteer to ensure that a DBS check is undertaken on all volunteers which require one and that a record of volunteers is maintained within their Directorate / Service areas. As a result, there remains a degree of risk that a volunteer could be engaged into a post which requires a DBS check who has not had one.

The first check on volunteers to ensure that a risk assessment has been completed for any volunteers which have a positive DBS clearance was undertaken in October 2018. Three volunteers were identified with positive DBS checks in volunteering posts which require a DBS clearance. Managers for each of the three volunteers were contacted by HR to ensure that a risk assessment had been completed for each. The findings of which have been detailed below:

Position	Level of DBS Check Required	Date Manager Contacted for Risk Assessment	Date Manager provided Risk Assessment / Justification	Audit Commentary
Supported Lodging Provider	Enhanced	29 <sup>th</sup> October 2018	In Progress	See below
Childcare Worker	Enhanced	27 <sup>th</sup> October 2018	28 <sup>th</sup> October 2018	Volunteer did not commence with role due to other employment
Chaperone	Enhanced	27 <sup>th</sup> October 2018	30 <sup>th</sup> October 2018	Volunteer was not engaged by manager as a result of the positive check

With regard to the Supported Lodging Provider, following initial contact with the manager on 29<sup>th</sup> October 2018, the manager was subsequently chased a further two times before a response was received. This finding supports the issue outlined within 1.2a above where managers were not providing a prompt response to HR with regard to risk assessments (for positive DBS checks) for employees A recommendation has been raised within 1.2a above to address the this.

An update on the status of the risk assessment for the Supported Lodging Provider was provided by HR on 3<sup>rd</sup> December 2018. HR have been informed by the manager for the service that the volunteer did not commence with the role.

Whilst guidance relating to volunteers has been updated and a process is in place to check volunteers with positive DBS checks, there is still a degree of risk that volunteers could be appointed into positions which require a DBS check without one being undertaken as the onus is for managers to ensure that a comprehensive and accurate record of volunteers is maintained. To assist the Council, we are currently in the process of undertaking a separate benchmarking exercise with our Partner authorities (both District and County Councils) in order to establish how volunteer DBS checks are managed in other authorities. The findings will be communicated to HR in a separate report.

**2. Risk: Individuals who require DBS clearance, start work prior to clearance being obtained, or an appropriate risk assessment in place leading to potentially unsuitable individuals working with vulnerable people.**

2.1a Finding and Action		
Issue	Recommendation	Priority 1
Risk assessments are not completed for all individuals appointed before DBS clearances are received.	I recommend that the Service Director Organisational Development ensures that a process is put in place to confirm that a risk assessment has been completed prior to an individual starting in post before a DBS clearance is received.	
<i>SWAP Ref. 39210</i>		
<b>Management Response / Agreed Action (27<sup>th</sup> September 2018)</b>		
<p>There is a standard process already in place whereby following submission of the manager’s DES request which confirms the start date of the employee, the HR Pay Support team reviews the status of the DBS check as they set up the employment record. Where the criminal check outcome is pending or not commenced, the manager is contacted and advised that a risk assessment must be undertaken pending clearance. That risk assessment must be undertaken by the employing manager. A copy of any completed risk assessment will be requested from the employing manager and retained on the employee’s personal file.</p> <p>In addition to the monitoring of the overall compliance position on a weekly basis a separate report is produced that looks specifically at new recruits into roles that require a DBS clearance of some sort. This report highlights where clearances have been received before start date or where clearance has not been received but a risk assessment has been completed. Again, this information is provided to HR&amp;OD Business Partners who share this with relevant managers to ensure full visibility of the data and appropriate action is taken</p>		
<b>Summary of Progress</b>		<b>In Progress</b>
<p>A process is now in place whereby the HR/Pay team reviews the status of a DBS check as they set up the employment record. The process is outlined within a new starter flow chart available to the HR/Pay team. The new starter flow chart outlines steps to be taken in a number of circumstances which ensure either a check has been undertaken or an appropriate risk assessment is in place where employees are either starting in positions before a DBS clearance is received or if a positive check has been returned. A weekly report from DES is run which will identify new starters without a DBS check in positions requiring one. HR Officers chase managers to ensure that a risk assessment (starting without DBS) is completed for all employees matching the above criteria. At the time of testing, we were provided a copy of the most recent report dated 17<sup>th</sup> October 2018. The report highlights all current employees without a DBS check in posts requiring one. A total of 35 employees were identified originally within the report. As of the 6<sup>th</sup> November 2018, there were 14 employees still awaiting clearances and no confirmation has been obtained from their managers as to whether a risk assessment has been completed or if a DBS check has been received. A sample of five employees</p>		

marked as not having had a response back from managers confirming whether a risk assessment has been completed or if a DBS check has been received were also checked to ensure that HR were actively pursuing a response. In all five cases, there was evidence to support that HR had been chasing managers for a risk assessment. A weekly report will be provided to HR Business Partners which will identify new employees in posts which require a DBS check who have started without DBS clearances being received. The information within these reports are used by HR Business Partners to chase managers directly to ensure that a risk assessment is completed whilst DBS clearances are pending.

Whilst we are able to confirm that managers are being chased by HR to ensure a risk assessment is in place for employees who have started in posts which require a DBS check without clearances being received, there are still 14 employees awaiting clearances with no confirmation obtained from their managers whether a risk assessment has been completed or if a DBS check has been received. The implementation of the recommendation is therefore considered to be in progress.

An update on the status of the risk assessment was provided by HR on 3<sup>rd</sup> December 2018. HR have confirmed that there are now just two employees awaiting clearances or a completed risk assessment.

It should also be noted that a sample of five employees marked as having had their DBS clearances received and a further five marked as having had risk assessments completed since the report was produced were checked to verify that these were in place. In all cases reviewed, we verified that a DBS check had been received and the correct clearance had been obtained or that a risk assessment had been completed.

Revised Implementation Date	31/12/2018	Revised Responsible Officer	Service Director Organisational Development
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2.1b Finding and Action		
Issue	Recommendation	Priority 2
Risk assessments are not completed for all individuals appointed before DBS clearances are received.	I recommend that the Service Director Organisational Development ensures that appropriate investigations are undertaken to ensure that a risk assessment has been completed for the four employees where an assessment could not be located within their personnel record or appropriate DBS clearance has subsequently been received. Further work should be undertaken to ensure that all employees with outstanding DBS clearances have a risk assessment on file.	SWAP Ref. 39209

**Management Response / Agreed Action (27<sup>th</sup> September 2018)**

In respect of the four employees where a risk assessment could not be located in the time available, a further investigation will be carried out during September. A subsequent piece of work relating to staff who still have DBS clearance outstanding following commencement of employment, to check personnel files for copies of risk assessments and to follow up missing forms with managers will be undertaken during October.

**Summary of Progress****Complete**

As part of a sample test performed in our original audit, there were four instances where a risk assessment could not be located for an employee appointed into a post before a DBS clearance was received. No response was provided by the manager as to whether one had been completed before the audit was finalised. As a result, a recommendation was raised to ensure that these were in place. As part of this follow up, we were provided with the risk assessments for all four of the employees. In all four cases, a risk assessment had been completed after the original audit testing had been concluded. The recommendation is considered complete.

The piece of work described within the Management Response which ensures staff with DBS clearance outstanding have completed risk assessments in place has been discussed as part of 1.1b above.

## Audit Framework and Definitions

Assurance Definitions	
<b>None</b>	The areas reviewed were found to be inadequately controlled. Risks are not well managed and systems require the introduction or improvement of internal controls to ensure the achievement of objectives.
<b>Partial</b>	In relation to the areas reviewed and the controls found to be in place, some key risks are not well managed and systems require the introduction or improvement of internal controls to ensure the achievement of objectives.
<b>Reasonable</b>	Most of the areas reviewed were found to be adequately controlled. Generally, risks are well managed but some systems require the introduction or improvement of internal controls to ensure the achievement of objectives.
<b>Substantial</b>	The areas reviewed were found to be adequately controlled. Internal controls are in place and operating effectively and risks against the achievement of objectives are well managed.

Definition of Corporate Risks	
Risk	Reporting Implications
<b>High</b>	Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.
<b>Medium</b>	Issues which should be addressed by management in their areas of responsibility.
<b>Low</b>	Issues of a minor nature or best practice where some improvement can be made.

Categorisation of Recommendations	
In addition to the corporate risk assessment it is important that management know how important the recommendation is to their service. Each recommendation has been given a priority rating at service level with the following definitions:	
<b>Priority 1</b>	Findings that are fundamental to the integrity of the service's business processes and require the immediate attention of management.
<b>Priority 2</b>	Important findings that need to be resolved by management.
<b>Priority 3</b>	Finding that requires attention.

## Authors and Distribution

*Please note that this report has been prepared and distributed in accordance with the agreed Audit Charter and procedures. The report has been prepared for the sole use of the Partnership. No responsibility is assumed by us to any other person or organisation.*

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