

AGENDA MANAGEMENT SHEET

Name of Committee **Audit & Standards Committee**

Date of Committee **20th February 2008**

Report Title **Audit Commission - Recommendations Tracking Report**

Summary The Audit Commission tracks it's key recommendations and progress on the delivery of actions flowing from these. This report monitors progress against these key recommendations.

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Would the recommended decision be contrary to the Budget and Policy Framework? No.

Background papers None

CONSULTATION ALREADY UNDERTAKEN:- Details to be specified

- Other Committees
- Local Member(s) Not applicable
- Other Elected Members
- Cabinet Member Cllr Cockburn
- Chief Executive
- Legal Sarah Duxbury
- Finance David Clarke, Strategic Director, Resources - reporting officer
- Other Chief Officers
- District Councils
- Health Authority
- Police



Other Bodies/Individuals

FINAL DECISION YES

SUGGESTED NEXT STEPS:

Details to be specified

Further consideration by this Committee

To Council

To Cabinet

To an O & S Committee

To an Area Committee

Further Consultation

Agenda No

Audit & Standards Committee - 20th February 2008.

Audit Commission - Recommendations Tracking Report

Report of the Strategic Director, Resources

Recommendation

To consider the Recommendations Tracking report and raise any comments with the Audit Commission.

1. Introduction

- 1.1 Set out as **Appendix A** is a copy of a report by the Audit Commission which reports on progress against the various recommendations they have made.
- 1.2 The first part of the paper is an update on the agreed recommendation made in a number of audit areas while the second part of the paper sets out improvements opportunities identified from their Use of Resources work.
- 1.3 It is expected that Tony Parks from the Audit Commission will attend the meeting to present the report and answer any questions.

DAVID CLARKE
Strategic Director, Resources

Shire Hall
Warwick

17 December 2007

Recommendations Tracking Report

Warwickshire County Council

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Introduction

- 1 This report follows up our work from previous years to assess progress in implementing agreed recommendations. The first part of the report is an action plan setting out the agreed recommendations made in the following reports.
 - Systems report
 - Review of Internal Audit
 - ICT Healthcheck
 - BVPP report
 - Annual Governance
 - Final Accounts Memo
 - Supporting People Re-inspection
- 2 The second part of the report sets out the improvement opportunities identified from our Use of Resources work.
- 3 This report will be regularly updated to include those recommendations made in reports that are still to be finalised.

Action Plan

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
Systems Report 2005/06 (November 2006)	<i>R1 Implement the recommendations made by internal audit regarding the payroll systems (in particular Unipay and HRMS) within the agreed timescales.</i>	3	Janice Semple	Implemented, service has been subsequently re inspected.		
Systems Report 2005/06 (November 2006)	<i>R2 Investigate the unexplained difference of £7k in the year end reconciliation of Abacus receipts to the ledger for the Trojan system.</i>	2	Phil Lumley Holmes	We have reviewed our closedown reconciliation processes for the end of 2006/07 and feel they have been made more robust. These await this year's audit.		
Systems Report 2005/06 (November 2006)	<i>R3 Carry out independent checks of invoices to proforma requests for the ASH system.</i>	2	Geoff Smith			Responsibility for checking of the details entered into the Ash system to any source document including pro-formas lies within each directorate where procedures are dictated and documentation retained.

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
Review of Internal Audit 2005/06 (January 2006)	<i>R4 Internal Audit should provide a written report to the Cabinet timed to support the Statement on Internal Control.</i>	3	Gary Rollason	Following the adoption of new terms of reference in 2006 the Audit and Standards Committee is now the appropriate committee to consider the annual internal audit report. The annual report and draft SIC is on the agenda for the June 4 meeting.		
Review of Internal Audit 2005/06 (January 2006)	<i>R5 Internal Audit should carry out an annual risk assessment of key financial systems to determine which systems should be included in the annual plan and maximise opportunities for co-operation with external audit.</i>	3	Gary Rollason	Financial systems have been included in the main risk assessment from 2006/07. Regular meetings are held with external audit to ensure co-ordination of work.		

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Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
ICT Health check 2005/06 (September 2006)	R6 <i>Establish corporate governance arrangements to ensure that the development and prioritisation of corporate ICT Services is in line with the Council's business objectives.</i>	3	Tonino Ciuffini, Head of ICT	The ICT Strategy for 2007 was approved by SDMT in March 2007 and specifically addresses governance arrangements. In future, SDMT will approve a formal ICT development plan on an annual basis and receive progress reports every six months.		
ICT Healthcheck 2005/06 (September 2006)	R7 <i>Review the terms of reference for and membership of the Business Applications Reference Group.</i>	2	Tonino Ciuffini, Head of ICT			The recommendation is no longer applicable, the Business Applications Reference Group having been disbanded.
ICT Healthcheck 2005/06 (September 2006)	R8 <i>Undertake an ICT staff skills assessment, identify gaps, assess the risks to the successful delivery of corporate and/or service objectives should the shortcomings not be addressed. Determine training and development needs.</i>	3	Tonino Ciuffini, Head of ICT	The ICT Strategy for 2007 recognises the need to improve ICT skills. A standard ICT skills set has been established in line with the Skills for the Information Age framework and is currently being piloted.		

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
ICT Healthcheck 2005/06 (September 2006)	<i>R9 Develop a corporate ICT Strategy.</i>	3	Tonino Ciuffini, Head of ICT	See R6.		
ICT Healthcheck 2005/06 (September 2006)	<i>R10 Ensure that the Deloitte recommendations are reviewed in the light of business needs, prioritised accordingly and progress monitored on a regular basis.</i>	2	Tonino Ciuffini, Head of ICT		The ICT Strategy and ICT Service Business Plans include many of the recommendations.	
ICT Healthcheck 2005/06 (September 2006)	<i>R11 Ensure that outstanding recommendations relating to ICT infrastructure are reviewed in the light of business needs, prioritised accordingly, and progress monitored on a regular basis.</i>	2	David Sutton, ICT Infrastructure Manager		The ICT Strategy and ICT Service Business Plans include many of the recommendations (eg server consolidation).	
ICT Healthcheck 2005/06 (September 2006)	<i>R12 Review the Foxpro development guidelines; enhance and update where necessary.</i>	1	Steve Goddard, ICT Systems Centre Manager			This is no longer relevant, as it is not planned to do any further developments using FoxPro and new application development tools are being introduced. These will require guidelines and standards that are specific to them.

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Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
ICT Healthcheck 2005/06 (September 2006)	<i>R13 Establish a formal procedure to ensure that all projects comply with the project management guidelines.</i>	2	David Sutton, ICT Infrastructure Manager		An ICT project co-ordination group has been established and is to develop formal procedures.	
ICT Healthcheck 2005/06 (September 2006)	<i>R14 Select a sample of projects and check these for compliance with the project management guidelines.</i>	2	David Sutton, ICT Infrastructure Manager		See R13 above.	
ICT Healthcheck 2005/06 (September 2006)	<i>R15 Ensure that the location of hand held fire extinguishers is clearly identified.</i>	1	Paul Glenn, ICT Production Centre Manager	Locations are clearly identified.		
ICT Healthcheck 2005/06 (September 2006)	<i>R16 Obtain SDMT approval to the Framework Information Security Policy.</i>	2	Tonino Ciuffini, Head of ICT	The Framework Information Security Policy has been approved by SDMT in September 2006.		
ICT Healthcheck 2005/06 (September 2006)	<i>R17 Ensure that none of the existing systems deviate from the Framework Information Security Policy in any significant respect.</i>	3	Les Harlock, ICT Security Manager		Initial emphasis has been placed on high priority systems.	
ICT Healthcheck 2005/06 (September 2006)	<i>R18 Implement the recommendations arising from the latest network vulnerability tests conducted by NTA Monitor.</i>	3	Les Harlock, ICT Security Manager		A further test has been conducted and the results are being reviewed.	

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
ICT Healthcheck 2005/06 (September 2006)	<i>R19 Ensure that the Framework Information Security Policy and other initiatives address the weaknesses identified by the 'General Computer Security Review' conducted by PwC.</i>	2	Les Harlock, ICT Security Manager		Initial emphasis has been placed on high priority systems.	
ICT Healthcheck 2005/06 (September 2006)	<i>R20 Make a decision on whether to extend the disaster recovery contract to other major systems.</i>	3	Paul Glenn, ICT Production Centre manager	The disaster recovery contract has been extended to cover all major applications.		
ICT Healthcheck 2005/06 (September 2006)	<i>R21 Ensure that the disaster recovery contract is subject to regular tests with the results being formally documented.</i>	2	Paul Glenn, ICT Production Centre Manager	Following problems with date information downloaded from the GPS Satellite system in June 2006, information was successfully restored from backup tapes.		
ICT Healthcheck 2005/06 (September 2006)	<i>R22 Ensure that the ICT Services business continuity plan is updated and tested on a regular basis.</i>	2	Dave Sutton, ICT Infrastructure Manager	Implemented		
ICT Healthcheck 2005/06 (September 2006)	<i>R23 Formulate a corporate business continuity plan.</i>	3	Gary Rollason	We have developed contingency plans for all priority services.		

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Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
ICT Healthcheck 2005/06 (September 2006)	<i>R24 Ensure that the HRMS system is subject to formal project closure procedures and that lessons learnt are disseminated to appropriate Officers and staff.</i>	2	David Clarke, Resources Strategic Director	Implemented		
BVPP Report 2005/06 (November 2005)	<i>R25 The Council should ensure that all performance targets are published in the BVPP.</i>	3	Corporate Performance Officer (Colin Gordon)	All targets supplied by the Directorates are reviewed and published in the BVPP as required each year.		
BVPP Report 2005/06 (November 2005)	<i>R26 The Council should review its quality assurance arrangements to ensure that standards are consistently high across all departments.</i>	3	Corporate Performance Officer (Colin Gordon)	A new Corporate Data Quality Policy has been developed and implemented to ensure that all Directorates are meeting the required standards consistently. In addition, meetings of Performance Leads/Champions from all Directorates ensure experiences of best practice are shared and any issues discussed.		

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
BVPP Report 2005/06 (November 2005)	<i>R27 Copies of the Performance Plan should be available to members of the public at libraries from 30 June each year.</i>	3	Corporate Performance Officer (Colin Gordon)	Copies of the BVPP are available to members of the public at Libraries from 30 June each year, as the plan is published on the Warwickshire County Council website on the internet prior to being printed in hard-copy form.		
BVPP Report 2005/06 (November 2005)	<i>R28 Test checks should be carried out on the data included in the DC AID system to ensure accuracy.</i>	3	Jasbir Kaur	We undertake two checks per year of 10 random planning applications. The checks are to confirm the date when a valid application was been received with the entry on DC Aid		
BVPP Report 2005/06 (November 2005)	<i>R29 A log should be maintained of the date that a decision is notified to the planning applicant. This should include those cases notified directly by the Legal department.</i>	2	Jasbir Kaur Ian Mariot	This was implemented on 31 August 2005. EED (Development Group) and Law and Governance keep a book in which we record and sign when each planning application was post out.		

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BVPP Report 2005/06 (November 2005)	<i>R30 All documentation supporting PI calculations should be retained.</i>	2	Alison Insley	implemented		
BVPP Report 2005/06 (November 2005)	<i>R31 The Council should carry out Library stock checks on a rolling basis, for example over a five-year period.</i>	2	Ayub Khan	Yes, A full stock count is planned for 2008.		
Annual Governance Report 2005/06	<i>R32 Ensure that the Statement of Accounts are supported by a robust set of working papers from all departments.</i>	3	Group Accountant, Financial Accounting Team, Resources Directorate	Implemented		
Annual Governance Report 2005/06	<i>R33 Improve arrangements for identifying related party transactions.</i>	3	Group Accountant, Financial Accounting Team, Resources Directorate	For 2006/07 the process has been improved.		

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
Annual Governance Report 2005/06	<i>R34 The Council should closely monitor the progress being made against the supporting people improvement plans.</i>	3	Graeme Betts	Implemented. Improvement Plan available. Updates to SPCB and Cabinet.	Bi monthly to SPCB	Performance monitoring reports presented to Commissioning Body (CB) on a bi monthly basis. Divisional Performance Management meetings held monthly to discuss programme performance. Service Improvement Plan presented to May CB meeting. Regular exception reporting to be built into future reporting structures from July 07. Monitoring and progress reports presented to Performance Improvement Board and AHCS OSC meetings. Supporting People Improvement Plan informs Divisional Service Plan delivery.

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Annual Governance Report 2005/06	<i>R35 Develop and implement performance management systems that ensure that deteriorating performance at service level is identified quickly at corporate level and corrected at an early stage.</i>	3	Monica Fogarty	The Performance Management System has been enhanced through a system of Corporate and Directorate Report Cards focused on high priority and poor performing areas has been implemented from April 2007. The Corporate Report Card will focus on a targeted selection of indicators and provide a health check for the organisation which will be monitored on a quarterly basis by Cabinet. It will be supported by six Directorate Report Cards which will report a mixture of Corporate and Directorate specific measures to the Overview & Scrutiny Committees, where they can be elevated to the Corporate Report Card if required.		

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
Annual Governance Report 2005/06	R36 <i>The Council should ensure that arrangements for ensuring data quality are more consistent across directorates.</i>	2	Monica Fogarty	A new Corporate Data Quality Policy has been developed and implemented to ensure that all Directorates are meeting the required standards consistently. In addition, meetings of Performance Leads/Champions from all Directorates ensure experiences of best practice are shared and any issues discussed.		
Annual Governance Report 2005/06	R37 <i>The Council should:</i> <ul style="list-style-type: none"> • <i>closely monitor the measures being taken to minimise future slippages in the capital programme; and</i> • <i>continue to regularly review over the long term, the financial position of the pension fund.</i> 	3	Oliver Winters	We regularly review the capital programme and report changes to Cabinet. We have implemented a new investment manager structure And continually review performance.		

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Final Accounts Memo 2005/06 (December 2006)	<i>R38 The Authority should be able to explain what Adjustment A consists of, by analysing the components of the difference between the closing overall credit ceiling and the CFR at 1 April 2004.</i>	3	Phil Triggs	The authority has this information.		
Final Accounts Memo 2005/06 (December 2006)	<i>R39 An Annual impairment review should be carried out in accordance with the SoRP.</i>	3	Virginia Rennie	As part of 2006/07 Closedown.		
Final Accounts Memo 2005/06 (December 2006)	<i>R40 A copy of the imprest balance at 31 March should be retained to support the balance sheet figure</i>	2	Phil McGaffin	Implemented		
Final Accounts Memo 2005/06 (December 2006)	<i>R41 The sale of assets should be accounted for in full, with income recognised only if the asset has been sold and written out in the year.</i>	2	Virginia Rennie	Sale of assets accounted for in line with the SORP in the 2006/07 accounts.		
Final Accounts Memo 2005/06 (December 2006)	<i>R42 Capital spend below deminimis should be charged directly to the revenue account.</i>	2	Virginia Rennie	As part of closing 2006/07 accounts .		
Final Accounts Memo 2005/06 (December 2006)	<i>R43 Depreciation should not be charged on non-operational assets.</i>	2	Virginia Rennie	As part of closing 2006/07 accounts.		

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
Final Accounts Memo 2005/06 (December 2006)	<i>R44 A five year rolling programme of valuations should be considered. This would ensure that 20 per cent of the authority's assets were reviewed every year.</i>	2	Virginia Rennie			The SORP provided scope to revalue every five years. We comply with the SORP. The cost of implementing a rolling programme is significantly greater than our current processes.
Final Accounts Memo 2005/06 (December 2006)	<i>R45 The Authority should review its arrangements for identifying relevant expenditure (Local Authority Goods & Services Act).</i>	2	Andrew Lovegrove	Reviewed as part of 2006/07 closure.		
Final Accounts Memo 2005/06 (December 2006)	<i>R46 Care should be taken to eliminate errors in the calculation of income (Local Authority Goods & Services Act).</i>	2	Andrew Lovegrove	Revised guidance has been issued to all staff involved in closure.		
Final Accounts Memo 2005/06 (December 2006)	<i>R47 The accounts should comply with SoRP disclosure requirements (analysis of net assets employed and analysis of capital spend).</i>	2	Andrew Lovegrove	The 2006/07 accounts will comply with the SORP		

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Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
Final Accounts Memo 2005/06 (December 2006)	<i>R48 A consistent approach to bad debt provision should be adopted across the Authority in accordance with the Debt Recovery best practice guidelines.</i>	2	Andrew Lovegrove	Revised guidance has been issued to all staff involved in closure.		
Final Accounts Memo 2005/06 (December 2006)	<i>R49 Care should be taken to eliminate errors in the calculation of receipts in advance.</i>	2	Andrew Lovegrove	Revised guidance has been issued to all staff involved in closure.		
Final Accounts Memo 2005/06 (December 2006)	<i>R50 The Landfill Allowances Trading Scheme should be accounted for in accordance with DEFRA and LAAP bulletin 64.</i>	2	Liz Firmstone	Implemented for 2006/07 closure.		
Final Accounts Memo 2005/06 (December 2006)	<i>R51 The Pension Fund accounts should comply with SoRP disclosure requirements.</i>	3	Phil Triggs	The accounts comply with the SORP (CIPFA).		

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
<p>Supporting People Re-inspection (July 2006)</p>	<p><i>R52 Improve the governance and management of the Supporting People programme by:</i></p> <ul style="list-style-type: none"> • <i>Clarifying and agreeing the different roles of the governance bodies and ensure that these are complimentary;</i> • <i>developing service user engagement in the delivery and governance of the programme;</i> • <i>Undertaking diversity impact assessments of all policies and functions of the programme;</i> • <i>developing effective scrutiny and performance management for all aspects of the governance and management of the Supporting People programme; and</i> • <i>developing clear plans to deliver the five-year strategy that are focused on jointly agreed priorities and are linked to the strategic objectives of partner agencies.</i> 		<p>Graeme Betts</p>	<p>Part of the overall Improvement plan. Addressed and completed governance changes.</p> <p>Active development of customer engagement programme.</p> <p>Yes</p> <p>Performance monitoring and Improvement report 23/5 to SPCB. Monitoring and review information changes on reporting content. Refreshed five year strategy June to September in development. Linked to needs analysis and partner/stakeholder and user consultation views.</p>		<p>New governance arrangements agreed March 2007 via Commissioning Body and respective partner organisations' cabinet or board structures. New Terms of Reference agreed for each group and Memorandum of Understanding and Financial Protocol agreed by CB.</p>

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Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
<p>Supporting People Re-inspection (July 2006)</p>	<p><i>R53 The Council must establish a comprehensive needs assessment framework to:</i></p> <ul style="list-style-type: none"> • <i>identify the full range of need in Warwickshire including those of diverse and socially excluded communities;</i> • <i>identify gaps in service provision to vulnerable people;</i> • <i>identify and agree the shared priorities of the Council and its partners;</i> • <i>ensure these priorities reflect the needs of all Warwickshire's diverse communities;</i> • <i>prioritise the delivery of new or re-configured services; and</i> • <i>inform the revised five-year strategy.</i> 		<p>Graeme Betts</p>	<p>Developed the framework and content needs ongoing updates with range of partner contributions.</p> <p>Core strategy development group will ensure this occurs and annual updates to refresh the annual plan/five years strategy will occur in consultation with all of above.</p>		<p>Service User Involvement Strategy agreed as a working document at May CB meeting subject to ongoing consultation. Action Plan developed to support the implementation of the Strategy at an operational level. Report to CB in May 2007 on progress with service user involvement with proposals to consider effective service user involvement in governance arrangements through formal advocacy arrangements.</p>

Audit	Recommendations	Priority 1=Low 2=Medium 3=High	Responsible	Implemented	Ongoing	Explanation for why not implemented
<p>Supporting People Re-inspection (July 2006)</p>	<p><i>R54 The Council must fully implement its value for money methodology to:</i></p> <ul style="list-style-type: none"> • <i>assess all services to ensure that they are strategically relevant, delivering housing-related support and best value;</i> • <i>establish a commissioning strategy and practice that represents best practice;</i> • <i>ensure expenditure meets grant conditions; and</i> • <i>negotiate new long-term contracts.</i> 		<p>Graeme Betts</p>	<p>Agreed and underway.</p> <p>Second stage of review process reassures service against these requirements.</p> <p>Commissioning and retraction plan inform the strategic priorities and IA report against grant conditions occurred.</p> <p>Steady state contract being secured.</p>		<p>Value for Money methodology signed off by CB at March meeting. All services have been subject to a strategic relevance assessment and VfM assessment as part of the service review process. Services that are not strategically relevant or best value in terms of quality or performance have been identified for decommissioning. Eligibility Criteria currently being reviewed to reflect changes in grant conditions April 2007. Services, which are ineligible following review, have been or are being decommissioned. New long-term steady state contracts in place. All action plans under interim contract arrangements signed off as complete. Steady state contracts issued to all accredited providers with no outstanding contract negotiation issues.</p>

Use of Resources Auditor Judgements 2006 (December 2006)

Improvement Opportunities	Responsible	Action Taken
<i>R55 Submit for audit accounts that contain only errors considered 'clearly trivial'.</i>	Andrew Lovegrove	This will be assessed during the opinion audit (June - September 2007)
<i>R56 Produce working papers that could be considered exemplary, for example, follow best practice.</i>	Andrew Lovegrove	This will be assessed during the opinion audit (June - September 2007)
<i>R57 Publish an annual report or similar document which includes summary accounts and an explanation of key financial information and technical terms designed to be understandable by members of the public.</i>	Andrew Lovegrove	For 2005/06 we published an annual report which included summary accounts and key performance information. We intend publishing a similar annual report for 2006/07.
<i>R58 Ensure the annual report or similar document is available in a wide variety of formats to meet local user needs (for example, different languages, large print, speaking version).</i>	Andrew Lovegrove	The County Council offers a translation service that will translate the annual report in to a range of different formats and languages. This service is accessible via libraries or the website, links as follows: Interpreting and Translation Services - About Us - Warwickshire Web
<i>R59 Ensure that the improvements proposed to the MTFS become operational.</i>	Oliver Winters	MTFS is closer aligned to the corporate business plan and is the central basis for budget allocations.

Improvement Opportunities	Responsible	Action Taken
<i>R60 Put in place a MTFS that describes in financial terms joint plans agreed with partners and other stakeholders.</i>	Oliver Winters	The MTFS incorporates the LAA which covers our major key partners/stakeholders.
<i>R61 Ensure that where target levels for reserves and balances are exceeded, the council has identified and reported to members the opportunity costs of maintaining these levels and compares this to the benefits it accrues.</i>	Oliver Winters	Reserve levels are monitored and reported to members on a quarterly basis. The reserves level exceeds the minimum level as assessed by a risk analysis.
<i>R62 Ensure the risk management process specifically considers risks in relation to significant partnerships and provides for assurances to be obtained about the management of those risks.</i>	Oliver Winters	We have undertaken an exercise to identify our partners and the governance arrangements for each of these partnerships. The assessment of the adequacy of the governance arrangements is the management of the potential for risk.
<i>R63 Provide on-going risk management awareness training for staff and members.</i>	Oliver Winters	Risk management and awareness is embedded within the organisation. There is a corporate risk register and the risks cascade down into Directorate business plan. We are now moving from risk assessment to business continuity and training is being prepared for officers and members.
<i>R64 Put in place a business continuity plan which is reviewed on a regular basis.</i>	Oliver Winters	We have appointed a member of staff to drive forward business continuity and business continuity plans are being formulated.

Improvement Opportunities	Responsible	Action Taken
<i>R65 Identify significant partnerships and ensure appropriate governance arrangements are in place for each of them.</i>	Oliver Winters	Work has been undertaken to identify key partnerships. The LAA incorporates the key partnerships and governance arrangements have been established for the LAA.
<i>R66 Ensure governance arrangements with respect to partnerships are subject to regular review and updating.</i>	Oliver Winters	The governance arrangements for the LAA are fresh as the LAA only came into place from 1 April 2007.
<i>R67 Improvements in VFM can be achieved by delivering better outcomes from priority services that are currently underperforming. In particular there is a need to improve adult services by addressing the recommendations in the CSCI Annual Performance Assessment and the inspection of Supporting People.</i>	Oliver Winters	We undertake comprehensive VFM analysis and the outcome of this feeds into the budget process and is the driver of a number of VFM reviews.