Appendix C

ORIGINAL ACTION DATE EXCEEDED BY **OVER 12 MONTHS**

Department Name: Corporate Resources

| Directorate Job Name | DCC Corporate Resources Creditors 2015-16 | | | |
|--|--|-------------|------------------------|---|
| Risk Rating | Moderate Risk | | | |
| Rec No | <u>I</u> | | | |
| Responsible Officer | AP Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| Accounts Payable Section was no longer able to undertake regular checks to highlight duplicate payments. Reliance was being placed on the budget monitoring work of Accountancy to highlight potential duplicate payments. | We recommend that a more formal structured approach is taken to the identification and investigation of potential duplicate payments. The report currently produced by Oracle Admin should be examined by Accounts Payable and each line should be examined and investigated and action taken where necessary to recover the payment. All investigations should be evidenced and retained by Accounts Payable. | 01/09/2016 | 01/04/2018 | The duplicates report was not being run as of 8/12/17 but is planned to be reinstated from 1/4/18 when a restructure of the team will take place and this task will be reallocated. |

| Directorate | DCC Corporate Resources | | | | | |
|--|---|---------------|------------------------|---|--|--|
| Job Name | Payroll 2015-16 | | | | | |
| Risk Rating | Moderate Risk | Moderate Risk | | | | |
| Rec No | 2 | | | | | |
| Responsible Officer | Senior Health & Safety Adviser | | | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments | | |
| Managers had not been consistently carrying out checks on MOT certificates, driving licences or insurances which contributed to ensuring that officers met the legally required driving standards. | We recommend that managers be reminded on a regular basis of the checks required to ensure that drivers are legally entitled to drive for work. | 31/10/2016 | 31/12/2017 | Work was progressing in the summer but I don't know if it is complete. (update rcvd 29/11/16 - Date extended due to staffing changes within team - new policy and guidance due for issue shortly. | | |

Department Name: Communities and Place

| Divariante | DCC Carraged Bassinas | | | | |
|--|--|-------------|------------------------|--|--|
| Directorate | DCC Corporate Resources | | | | |
| Job Name | Markets | | | | |
| Risk Rating | Moderate | | | | |
| Rec No | 4 | | | | |
| Responsible Officer | Head of Service (Regen Projects) | | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments | |
| There was no approved Council policy in place for offering concessions on rental charges to market stall traders in the Council's three markets. | We recommend that an approved Council policy is established which details the concessions that can be offered to market stall traders and which determines the criteria that traders must meet in order to obtain the concession. This would ensure that a fair, transparent and consistent approach is undertaken in awarding concessions to traders. | 01/01/2014 | 31/05/2018 | Update from Service Director - In the Marketing Officers continuing absence, Director and Head of Service met with the Cabinet Member to discuss the outstanding audit item (Member approval / verification of the promotional 'be your own boss' scheme. Whilst we were intending to bring a report to a formal Cabinet Member Meeting in February to address this, the Cabinet member has asked for this to be delayed until March (to allow discussion with his Cabinet colleagues). We will work to this timetable but it will miss the projected date for this (February). As advised the Cabinet Member, the purpose of this approval meeting is to provide evidence of a formally approved process for governance purposes; it does not mean that formal approval was not previously obtained, but that we cannot produce evidence of this. | |

| Directorate | DCC Communities and Place | | | | | |
|---|--|----------------------------|------------------------|--|--|--|
| Job Name | Asset Management & Estates | Asset Management & Estates | | | | |
| Risk Rating | Significant Risk | | | | | |
| Rec No | 1 | | | | | |
| Responsible Officer | Head of Strategic Asset Management and Esta | ates | | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments | | |
| The asset list submitted for insurance did not reflect asset transactions undertaken outside of the Estates Section. The SAM system had not been updated as there was no process for notifying Estates of these changes | We recommend that the Estates Section in conjunction with Corporate Asset Management Group devise formal procedural guidelines requiring Council departments to notify Estates Section of their property transactions. | 01/09/2015 | 31/03/2018 | The revised Corporate Landlord Policy and Procedure is at draft stage and is being reviewed. This will enforce all property transactions to be approved by the Head of Strategic Asset management and estates and will ensure that transactions do not take place outside of the SAM system. There will be some system updates required to allow for full automation of notifications between the various key teams (legal, maintenance, insurance, capital accounts) which will enhance the information flow between teams. Date extended due to waiting for the implementation of the SAM/RAM interface. | | |

| Directorate | DCC Communities and Place | | | | | |
|---|--|---------------|------------------------|---|--|--|
| Job Name | Commercial Rents | | | | | |
| Risk Rating | Moderate Risk | Moderate Risk | | | | |
| Rec No | 1, 11 | | | | | |
| Responsible Officer | Head of Strategic Asset Management and Estates | | | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments | | |
| There was no documented process or procedural guidance available for the valuation of properties and subsequent calculation of rents. | We recommend that process notes or procedural guidance for the valuation or properties and subsequent calculation of rents are documented. | 30/04/2017 | 31/12/2017 | Appointment of new Estates Manager fell through and post is being re-advertised with a planned interview date of 11/12 May 2017. Estates Manager start date expected to be 17/7/17. | | |
| The Council did not have a policy for the application of rent free periods and other incentives to tenant properties. | We recommend that the Estates Section introduces a Free Rents and other Incentives policy to ensure that these are more consistently applied. The policy should cover how these are calculated so that costs and benefits are methodically analysed, a section of the duration of free rent periods, how these are approved and by whom and how they might be advertised to attract new tenants and re-let empty properties. | 30/04/2017 | 31/12/2017 | Appointment of new Estates Manager fell through and post is being re-advertised with a planned interview date of 11/12 May 2017. Estates Manager start date expected to be 17/7/17. | | |

Anti-Fraud & Corruption

| Directorate | Anti-Fraud & Corruption | | | | | |
|---|---|----------------|------------------------|---|--|--|
| Job Name | Purchase Cards | Purchase Cards | | | | |
| Risk Rating | Moderate Risk | | | | | |
| Rec No | 1, 6 | | | | | |
| Responsible Officer | Head of Procurement and Contracting | | | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments | | |
| The Procurement Card Policy was still in draft and as such had not been published. | We recommend that an appropriate, consistent Council-wide policy be established as a guide for the issue and operation of the purchase card scheme and for taking disciplinary actions with respect to cardholders who make or approve inadvertent, fraudulent, improper, or abusive credit card transactions. Corporate credit card abuse should also be included in the Council's Anti-fraud and Corruption Strategy and cardholders must be made aware of the consequences of abuse. | 01/04/2017 | 20/07/2018 | The draft policy has been updated and approval will be sought from relevant channels. | | |
| Transactions logs were not always submitted promptly to Accountancy, to enable expenditure posted to the miscellaneous budget code on the General Ledger to be reallocated appropriately. | We recommend that management enforces the user guide instruction for the prompt submission of transaction logs to Accountancy to enable proper coding of expenditure. | 01/04/2018 | 27/07/2018 | 26 October 2017: Awaiting policy approval. Action Date revised. | | |

ORIGINAL ACTION DATE EXCEEDED BY OVER 6 to 12 MONTHS

Department Name: Corporate Resources

| Directorate | DCC Corporate Resources | | | |
|---|-------------------------------------|-------------|------------------------|--|
| Job Name | Creditors 2017-18 (Agile Audit) | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 6, 8 | | | |
| Responsible Officer | Head of Procurement and Contracting | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| There was no independent check to verify that | | | 29/06/2018 | Head of Procurement liaising with Business Support |

| In the absence of the Accounts Payable Manager, | Invoices rejected as part of the invoicing process | 01/08/2017 | 29/06/2018 | Head of Business Support is e undertaking a review of |
|--|--|------------|------------|---|
| invoices rejected as part of the indexing processes | should be reviewed on a daily basis, in the | | | the Service and will provide an update by end of |
| are not being reviewed / dealt with and the facility | absence of the Accounts Payable Manager (who | | | June, following transfer of the Service to Business |
| to make bulk bank account changes was lost. | normally undertakes the review), should be | | | Support. |
| | identified to undertake the duty. With the | | | |
| | necessary training being supplied as required. | | | |

Department Name: People Services

| Directorate | DCC People Services | | | |
|--|---|-------------|------------------------|---|
| Job Name | Business Intelligence | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 5 | | | |
| Responsible Officer | Head of Service | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| Care Plans, and the subsequent care packages, were not being reviewed on a timely basis. | We recommend that the Head of Community Support take action to reduce waiting lists on reviews to an acceptable level, in line with the statutory requirements of the Care Act. Thereafter, sufficient control(s) should be put in place to maintain a sustained reviewing programme with priority around reviews embedded into to programme going forward. | 05/09/2017 | 01/04/2018 | Funding for the reviewing team has been extended until March 2018, so the action will be that the team will continue until then. By which time a structured approach should be in place to maintain a sustained reviewing programme going forward |

Department Name: Communities and Place

| Directorate | DCC Communities and Place | | | |
|--|---|-------------|------------------------|---|
| Job Name | Health & Safety | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 1,2,7,8 | | | |
| Responsible Officer | Occupational Health, Safety, Wellbeing and Attendance Officer | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| The recording of accidents and incidents involved the use of the Human Resources MiPeople system. Further reliance was also placed on the HR Data Management Team to process any amendments. The system did not provide a facility to automatically pursue officers to ensure action had been taken to | We recommend management consider use of a system which allows the Health and Safety Team full management and review of accidents and incidents occurring across the Council, also incorporating an automated facility for officers to be pursued when action was required to be taken to prevent a similar occurrence happening again. Consideration of | 31/10/2017 | 31/03/2018 | Following on from the audit of Corporate Health and Safety I can confirm that work is now in progress to implement the IT system (to which the audit recommendations are all linked). The first phase of implementation (service requests and accident notifications) will be in place by the end of this month; the other elements (inspections and audits, risk |

| mitigate further risks of an accident occurring again. | options available should include use of existing resources currently available at the Council's disposal. | | | scoring, training, etc.) will all be in place by the end of March 2018. An update with regards to recommendation nos 1&3 we are in the process of implementing the IT system we informed you of. We were hoping that we would have the first stage in by the end of October, but we are just waiting for IT to get back to us as we have submitted our Gateway 1 to the IT board. (Which I believe is today) Once we have that approved one of the H&S team is lined up ready to work with IT, who are also prepared, so that we can implement it as soon as possible. |
|---|---|------------|------------|---|
| Risk assessments were completed and maintained in isolation by departmental managers. There was no automated facility to serve as a reminder when an assessment was due for review or no central system which allowed generic risk assessment information to be shared across the Council. | We recommend that management consider the use of a central system which allows risk assessments to be shared from across the Council, especially where generic information would avoid duplication. Consideration should also be given to an automated facility which flags and sends reminders to officers of risk assessment review dates, in order that reviews can be undertaken in a timely manner. | 31/10/2017 | 31/03/2018 | Following on from the audit of Corporate Health and Safety I can confirm that work is now in progress to implement the IT system (to which the audit recommendations are all linked). The first phase of implementation (service requests and accident notifications) will be in place by the end of this month; the other elements (inspections and audits, risk scoring, training, etc.) will all be in place by the end of March 2018. |
| The current process of administering, recording and managing training is a labour intensive, manual process utilising systems (MiPeople and Lagan) outside the control of the Health and Safety Team, with the completion of manual booking forms, information having to be transferred from one system to another and no automated reminder facility for mandatory refresher training. | We recommend that management consider the use of one system for managing Health and Safety training which incorporates the use of electronic information flows as much as possible i.e. training course schedule, booking forms, automatic reminders, employee training history etc. In particular, the facility to issue automatic email reminders for those officers whose mandatory training is due to expire should also be considered as part of any new approach. | 31/10/2017 | 31/03/2018 | Following on from the audit of Corporate Health and Safety I can confirm that work is now in progress to implement the IT system (to which the audit recommendations are all linked). The first phase of implementation (service requests and accident notifications) will be in place by the end of this month; the other elements (inspections and audits, risk scoring, training, etc.) will all be in place by the end of March 2018. |
| Health and Safety workplace inspections were undertaken, but there was no current facility to automatically flag when an audit or inspection was due, assign corrective actions to responsible officers on the feedback reports or follow-up on corrective action to be taken, where weaknesses had been identified. | We recommend that management should consider the use of an automated facility for the audit programme, automatically flagging up when an audit falls due. The system should allow for any corrective actions to be properly assigned to responsible officers so that email reminders can be sent when the action date falls due. The system should also facilitate documentary evidence to be uploaded and automatically track non-conformance in order that any issues can be reported to Strategic and/or Service Directors for further action to be taken. | 31/10/2017 | 31/03/2018 | Following on from the audit of Corporate Health and Safety I can confirm that work is now in progress to implement the IT system (to which the audit recommendations are all linked). The first phase of implementation (service requests and accident notifications) will be in place by the end of this month; the other elements (inspections and audits, risk scoring, training, etc.) will all be in place by the end of March 2018. |

Anti-Fraud & Corruption

| Directorate | Anti-Fraud & Corruption | | | | | |
|---|---|-------------------------|------------------------|--|--|--|
| Job Name | Various Cash Ups | | | | | |
| Risk Rating | Moderate Risk | | | | | |
| Rec No | 11 | | | | | |
| Responsible Officer | Children's Home Manager | Children's Home Manager | | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments | | |
| A record of resident's property was not in place. | We recommend that a property receipt book is maintained to show all property residents have brought with them to Shine. This could inform the inventory records and the reconciliation to physical items held at Shine. | 22/09/2017 | 31/12/2017 | The application of this process by the team remains inconsistent, however, this remains a priority area for myself as the Homes Manager and will be addressed in individual staff MIPs and supervisions. It will be made clear to all staff that this is a safeguarding requirement under financial regulations as well as being detailed in the Children's Homes Regulations 2015 (Care and Control.) | | |

| Directorate | Anti-Fraud & Corruption | | | |
|---|--|-------------|------------------------|---|
| Job Name | Purchase Cards | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 7 | | | |
| Responsible Officer | Category Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| There were inconsistencies in the retention of receipts to validate expenditure and not all transaction logs had been authorised. | We recommend that management expedite the introduction of the on-line transaction and approval process (MasterCard Smart Data) within the Council to ensure the efficient approval and processing of purchase card transactions. Detailed guidance notes and training should be provided to cardholders and their line managers. | 01/10/2017 | 27/07/2018 | 03 October 2017: Online transaction and approval was being used from October 2017 so this should address the problem. Everyone has been instructed that for November 2017 only submissions and approval via the online route will be accepted. 26 October 2017: Awaiting policy approval. Action Date revised. 18 May 2018: Draft policy will be presented to Corporate Resources DMT on 05 June 2018, Action date revised 27 July 2018. |

| Directorate | Anti-Fraud & Corruption | | | |
|--|---|-------------|------------------------|--|
| Job Name | Registrars | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 8 | | | |
| Responsible Officer | Head of Customer Service | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| 12 staff had access to the code on the key cabinet at the Council House. There was also a proposal to fit key safes at Royal Oak House and the Royal Derby Hospital which would lead to a loss of accountability for keys. | We recommend that keys that would provide access to blank certificates should not be stored on site in a key safe. A Primary Key Holder should be nominated for each stock of certificates (main stock and any satellite stocks) This officer should have overall responsibility for the day to day security of certificates in their stock and should ensure that the keys providing access to their stock should be kept on their person at all times. Where it is known that the Primary Key Holder will be absent the key should be passed to a Secondary Key Holder who will sign to accept receipt of the key and responsibility for the stock. | 31/10/2017 | 29/06/2018 | Update 14/05/18: 1. At present this is not practical. Separate secure storage to be created as part of the Council House reconfiguration. Key safe to be located within this, with access restricted to authorised Registration Officers and deputies. Awaiting completion of the construction work – due May 2018. 2. Working towards a single secure certificate storage as part of the Council House Ground Floor Reconfiguration. Awaiting completion of the construction work – due May 2018. 3. Disagree the current process allows for accurate monitoring of accessibility to keys. |

ORIGINAL ACTION DATE EXCEEDED BY UP TO 3 MONTHS

Department Name: Corporate Resources

| Directorate | DCC Corporate Resources | | | |
|--|--|-------------|------------------------|--|
| Job Name | Procurement Control | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 1 | | | |
| Responsible Officer | Head of Procurement and Contracting | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| The Council did not have a documented Corporate Procurement Strategy, as recommended by the Local Government Association, and its Procurement Code had not been updated. | We recommend that a Corporate Procurement Strategy be documented, reflecting the recommendations in the National Procurement Strategy for Local Government in England 2014 by the Local Government Association, and that the Procurement Code be reviewed and updated as required. | 30/04/2018 | 30/06/2018 | 18/05/18: this has been updated to have a deadline of 30/06/18 in line with MIP objective. |

| Directorate | DCC Corporate Resources | | | |
|---------------------|-----------------------------------|-------------|-------------|------------------------|
| Job Name | Revenues Write-offs | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 8 | | | |
| Responsible Officer | Team Leader - Accounts Receivable | | | |
| Control Issue | Recommendation | Action Date | Revised | Status Update Comments |
| 555. 15555 | Recommendation | Action bale | Action Date | sidios opadie Commenis |

| Directorate | DCC Corporate Resources | | | |
|---|---|-------------|-------------|---|
| Job Name | Revenues Write-offs | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 2 | | | |
| Responsible Officer | Team Leader - Accounts Receivable | | | |
| Control Issue | Recommendation | Action Date | Revised | Status Update Comments |
| | | | Action Date | |
| A regular process of debt review was not in | We recommend that a regular process of debt | 01/06/2018 | | NDR - Write off procedure is now up and running and |
| operation for business rates or sundry debts. | review should be developed for business rates | | | being done monthly. |
| | and sundry debts, following which proposals for | | | - |
| | write offs should be put forward. | | | |

| Directorate | DCC Corporate Resources | | | |
|---|---|-------------|------------------------|---|
| Job Name | Revenues Contracts | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 7 | | | |
| Responsible Officer | Residential Care Charging Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| A regular process of debt review was not in operation for business rates or sundry debts. | We recommend that a regular process of debt review should be developed for business rates and sundry debts, following which proposals for write offs should be put forward. | 01/06/2018 | | NDR - Write off procedure is now up and running and being done monthly. |

Department Name: People Services

| Directorate | DCC People Services | | | |
|---|---|-------------|------------------------|---|
| Job Name | Payment of Adoption Allowances | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 2 | | | |
| Responsible Officer | Homecare & Charging Team Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| Individual financial assessments were not being properly completed and supporting documents for calculating special guardianship allowance were not being obtained. | We recommend that a financial assessment is properly completed for each individual child, to calculate the special guardianship allowance and that the supporting documents necessary to verify income and expenditure are obtained and filed to ensure a robust audit trail. | 31/05/2018 | | Head of Social Care Fieldwork and Exit from Care Team Manager already made aware of this request. Community Care Charging & Support Team Senior Finance Officer will confirm this in an email to the relevant people. |

| Directorate | DCC People Services | | | |
|--|--|-------------|------------------------|---|
| Job Name | Resident Funds – Virtual Accounts | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 4 | | | |
| Responsible Officer | Residential Care Charging Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| There was not an adequate process for ensuring that funds are transferred between Virtual and GASH accounts respectively when service users care arrangements change between residential and non-residential care. | We recommend that the process for ensuring that all services users transferring between residential and non-residential care is reviewed to ensure funds are transferred between GASH and Virtual Accounts in a timely manner. This will help to ensure a single record of all income and expenditure and a combined sum of resident monies providing a more accurate closing balance. | 31/05/2018 | | The balances for appointeeship cases are complex and time consuming. The Residential Care Charging Team complete balances as soon as they are able to do so and while appreciating the need for these to be done in a timely manner, its important that these are done correctly bearing in mind the Council is accountable for the funds held. |

Department Name: Communities and Place

| Directorate | Anti-Fraud & Corruption | | | |
|---|--|-------------|------------------------|--|
| Job Name | Markets | | | |
| Risk Rating | Significant Risk | | | |
| Rec No | 10 | | | |
| Responsible Officer | Markets Officer | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| Market Trader arrears were not being monitored and action had not been taken to recover money owed or to repossess the stall. | We recommend that swift action should be taken against market traders falling into arrears, in accordance with the markets debt management policy. A monthly meeting should take place between Markets staff and senior officers from the Accounts Receivable and Legal teams to monitor the arrears of market traders, and co-ordinate debt recovery actions. All the outstanding debts recorded on the Oracle system should be reviewed, and the appropriate course of action be considered for each one. Copies of reminder letters should be retained within the relevant traders information records. | 31/05/2018 | | An arrears process is being followed and arrears are now monitored on a weekly basis ensuring swift action is taken against traders with arrears. Monthly meetings will be held with Accounts and Legal to monitor and co-ordinate actions to recover debts. Copies of reminder letters are already kept on electronic trader files. To submit evidence for sign off by audit |

Anti-Fraud & Corruption

| Directorate | Anti-Fraud & Corruption | | | |
|--|--|-------------|------------------------|---|
| Job Name | Vulnerable Adults' GASH Accounts | | | |
| Risk Rating | Significant Risk | | | |
| Rec No | 1 | | | |
| Responsible Officer | Senior Office Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| Queries relating to funds belonging to service users for whom the Council was no longer an Appointee had not been promptly resolved and monies had not been transferred with the service user to the succeeding appointee. | We recommend that the queries relating to funds belonging to service users for whom the Council was no longer an appointee are resolved in a timely manner and that the funds are promptly transferred with the service user to the relevant body holding appointeeship. We suggest going forward that a deadline is put in place to ensure timely resolutions, fund transfers and that GASH accounts are monitored for inactivity. | 01/04/2018 | 31/08/2018 | 09/05/18 - Still not resolved as funds for deceased clients still held. Legal was emailed on 22/11/17 but with no response received. Legal emailed again 09/05/18. Revised action date of 31/08/18. |

| Directorate | Anti-Fraud & Corruption | | | |
|--|---|-------------|------------------------|------------------------|
| Job Name | Customer Services Investigation | | | |
| Risk Rating | Moderate Risk | | | |
| Rec No | 6,7 | | | |
| Responsible Officer | Senior Office Manager | | | |
| Control Issue | Recommendation | Action Date | Revised Action Date | Status Update Comments |
| There were no controls on the Chipside parking permit system to prevent a Customer Advisor from generating an excessive number of visitor parking permits, for personal use/gain and no management checks over use of controlled stationery. | We recommend that the Council raise a request with the system developers to rectify this flaw in the Chipside system. In addition, we suggest that periodically analysis is undertaken on the use of the income code, and the number of visitor parking permits produced to identify any instances where fraud may have occurred. | 01/06/2018 | | |
| The income received from issuing of parking permits was not being reconciled to the number of actual visitor parking permits produced on the Chipside system on a regular basis. | We recommend that a process for reconciling income received and visitor parking permits produced be established and undertaken on a regular basis. | 01/06/2018 | | |