

AUDIT COMMITTEE MEETING WEDNESDAY 8 JUNE 2022

No	Item	Summary of key Recommendations
1.	Apologies	Alderman McKeown, Councillors Anderson, McQuillan and Schenning
2.	Declarations of Interest	None
3.	Minutes of Audit Committee Meeting held Wednesday 9 March 2022	Taken as read and signed as correct
4.	Northern Ireland Audit Office (NIAO)	Information
5.	Draft Annual Governance Statement 2021-22	To recommend that Council approve the draft Annual Governance Statement 2021-22
6.	Internal Audit (Causeway Coast and Glens Borough Council)	Information
6.1	Births, Deaths, Marriages and Civil Partnerships Audit	Information
6.2	Labour Market Partnership Audit	Information
6.3	Internal Audit Annual Assurance Report and Opinion	Information
	Questionnaires Completed	
6.4	NIAO Fraud Assessment Questionnaire 2021-22 – Completed Assessment	Information
6.5	Managing Fraud Risk in a Changing Environment Self-Assessment Checklist 2021-22	Information
6.6	Proper Arrangements Questionnaire 2021-22	Information
7.	Internal Audit (Moore NI)	Information
7.1	Ballyreagh Golf Club	Information
7.2	Arts and Culture Centres	Information

No	Item	Summary of key Recommendations
7.3	Grants Management	Information
7.4	Performance Improvement Verification	Information
7.5	Prior Year Recommendations	Information
8.	Annual Self-Assessment Report 2022/23	To recommend that the Causeway Coast and Glens Borough Council approves the use of a 'survey monkey' to fulfil the requirement for the Audit Committee to complete a self-assessment checklist on the performance of the Audit Committee for 2022/23.
9.	Direct Award Contracts	Information
10.	Performance Improvement – Audit Proposals for Improvement Quarterly Update	Information
11.	Absence Report Year End 2022	Information
12.	Matters for Reporting to Partnership Panel	None
13.	Correspondence	
13.1	Colette Kane, Northern Ireland Audit Office (correspondence dated 20 th May 2022)	Information
	'In Committee' (Items 14-17 inclusive)	
14.	Corporate Risk Matrix	Information
15.	Legal Cases Activity	Information
16.	Whistle Blowing /Fraud	Information
17.	Retender of Internal Audit Contract (Co-Sourcing)	To recommend that Causeway Coast and Glens Borough Council go out to re-tender the contract for the annual delivery of Internal Audit for

No	Item	<i>Summary of key Recommendations</i>
		<i>the Council to fulfil its statutory obligations.</i>
18.	Any Other Relevant Business	<i>None</i>
19.	Date of Next Meeting – Wednesday 21 st September 2022 at 7 pm.	<i>Information</i>

**MINUTES OF THE PROCEEDINGS OF THE MEETING OF
THE AUDIT COMMITTEE
HELD IN COUNCIL CHAMBER CIVIC HEADQUARTERS AND VIA VIDEO
CONFERENCE ON
WEDNESDAY 8 JUNE 2022 AT 7.03PM**

- In the Chair:** Councillor Wallace (C)
- Members Present:** Alderman S McKillop (R)
Councillors Beattie (R), Dallat O'Driscoll (R), Holmes (R),
MA McKillop (R), McMullan (R), P McShane (R), Watton (C)
- Ind. Member Present:** I Mitchell (C)
- Officers Present:** M Quinn, Director of Corporate Services (C)
A Ruddy, Audit, Risk & Governance Manager (C)
I Owens Committee & Member Services Officer (C)
- In Attendance:** A Allen, Local Government Auditor, NI Audit Office (R)
C McHugh, Internal Auditor, Moore (NI) (R)
- C Thompson, ICT Officer (C)
C Ballentine, ICT Officer (C)
- Press 1no. (R)

Key: (C) = Attended in The Chamber
(R) = Remotely in attendance

The Director of Corporate Services undertook a roll call.

The Director of Corporate Services advised that as an apology had been received from the Chair and Vice-Chair, the Committee was required to appoint a Chair for the meeting and further advised that there were 9 members in attendance 2 of whom were present in the Chamber, Councillors Wallace and Watton.

Proposed by Councillor Watton
Seconded by Councillor Holmes and

AGREED - that Councillor Wallace take the position of Chair for the Audit Committee meeting.

Councillor Wallace assumed The Chair and advised Committee of its obligations and protocol whilst the meeting was being audio recorded; and with the remote meetings protocol.

1. APOLOGIES

Apologies were recorded for Alderman McKeown, Councillors Anderson, McQuillan and Schenning.

2. DECLARATIONS OF INTEREST

There were no declarations of interest.

3. MINUTES OF AUDIT COMMITTEE MEETING HELD WEDNESDAY 9 MARCH 2022

Copy, previously circulated.

AGREED – that the Minutes of the Audit Committee meeting held Wednesday 9 March 2022 were taken as read and signed as correct.

4. NORTHERN IRELAND AUDIT OFFICE (NIAO)

The Director of Corporate Services advised there were no reports to present and invited the NIAO representative to give a verbal update to the committee.

The NIAO representative advised as follows:

1. Regarding audit of financial statements interim testing was undertaken in February/March 2022 and NIAO await the draft statements for year 2021/22 with final testing commencing in July.
2. The Extraordinary Audit is at an advance stage and it is hoped that the report can be issued in early July 2022.

Councillor P McShane, referring to the timescale taken since the inception of the Extraordinary Audit report in September 2021, and said that July was not a good time for issue of the report. Councillor P McShane said he was concerned how it had panned out in terms of bringing forward evidence, submission of additional evidence and the timeline around issue of the report.

Alderman S McKillop asked the Local Government Auditor to respond to the comments made by Councillor P McShane, however the NIAO representative advised that he had difficulty with sound and did not fully hear what Councillor P McShane had said. The NIAO representative further confirmed that he understood that Councillor P McShane felt that July was not the time to issue the report and advised the Committee he

had no involvement in the Extraordinary Audit and was not in a position to comment regarding the detail within the report, nor associated timeline.

It was the wish of Alderman S McKillop that Councillor P McShane repeat his remarks, however Councillor P McShane advised this was not necessary and the Chair ruled that it was clear what had been said.

In relation to a comment Councillor P McShane made, Alderman S McKillop asked for Councillor P McShane's comments to be retracted.

* **Councillor Nicholl joined the meeting at 7.15 pm.**

5. DRAFT ANNUAL GOVERNANCE STATEMENT 2021-22

Report, previously circulated, was presented by the Director of Corporate Services.

The Director of Corporate Services advised that the detailed document presented was for comment, feedback, approval and provided commentary as follows:

Page 11 outlined a level of assurance provided in terms of review of effectiveness and for 2021/22 year satisfactory level of assurance.

Page 12 records significant governance issues in 2021/22. Matters raised under significance governance issues is aligned to Corporate Risk Register which would be discussed later in the meeting.

The Committee was advised the report was in draft and subject to change during Audit, when other matters may be raised.

The Independent Member congratulated the Chair on his appointment as Mayor.

The Independent Member said she believed this was an accurate reflection of issues Council and Audit Committee considered throughout the year and provided commentary. Page 12 and 13 outline significant governance issues to be addressed going forward which will also be published and provided to the Department. The four issues listed are representative of audits during the year which encountered difficulties.

Proposed by Councillor Watton
Seconded by Councillor Nicholl and

AGREED – to recommend that Council approve the draft Annual Governance Statement 2021-22.

6. INTERNAL AUDIT (CAUSEWAY COAST AND GLENS BOROUGH COUNCIL)

6.1 Births, Deaths, Marriages and Civil Partnerships Audit

Report, previously circulated, was presented by the Audit, Risk and Governance Manager.

The Audit, Risk and Governance Manager said that she visited all 4 locations, spoke with Registrars and the outcome of the audit was an overall Satisfactory level of assurance and commended the staff who had to adapt during the pandemic.

There were 5 Recommendations including 4 Priority 2 and 1 Priority 3 Recommendation.

NISRA the sponsoring body for Registration Services undertakes regular assurance and verification work routinely and it was suggested that recommendations contained within this report are progressed in timely manner.

The Chair requested the Director of Corporate Services would pass on thanks to Registration staff for work well done.

The Independent Member said that this was an excellent outcome with only a few minor Recommendations to take forward, particularly given the pressure staff were under and the impact of the pandemic.

6.2 Labour Market Partnership Audit

Report, previously circulated, was presented by the Audit, Risk and Governance Manager.

The Audit, Risk, and Governance Manager advised this was an area of audit not considered previously and came to the attention of the Auditor near the year end.

This was an initiative ran by the Department across 11 Council areas and each Council asked to formulate and develop a Labour Market and Partnership. The aim of this initiative was to reduce employment and to increase support for those who have health conditions and/or a disability to enable them to secure and hold down full and/or part time employment. This was an excellent initiative rolled out by then Department of which Council lead partner on.

The outcome of the audit was two fold which included verification of spending on grant claims submitted by Council as follows:-

Audit verified that monies were expended in line with conditions of grant.

Audit found that assurance of systems of governance, risk management and control systems were limited with the primary reason being that the partnership has yet to be established. Audit understands that a partnership will be formed in June 2022.

There was 1 Priority 1 Recommendation – that Officers get the Partnership in place at the earliest opportunity. The Annual work plan to be delivered so that the establishment of Partnership will allow this good work to progress.

Two additional lower Priority Recommendations were included and in Appendix 4, previously circulated, were minor Recommendations including that of accounts to be prepared on an accrual basis and submission of grant claims to be undertaken in a timely manner.

6.3 Internal Audit Annual Assurance Report and Opinion

Report, previously circulated, was presented by the Audit, Risk and Governance Manager.

The Audit, Risk, and Governance Manager advised the report summarised the work of the auditor and performance of internal audit service and how the overall assurance rating for the year is arrived at.

Committee were referred to table 1, page 6, of report which outlined planned audit work during the year. This included:

Audit area;
Who performed the audit;
Status of audit;
Overall outcomes.

Table 2, Page 6 noted a number of follow up audits in areas which had obtained a minimum level of assurance. This included corporate credit cards and management of agency staff.

A number of backlog audits from 2019/20 were carried out in 2021/22. These included Risk Management, Caravan Sites and Leisure Facilities.

87% of planned audit work for section, not including backlog audits, was achieved.

Page 9 showed the overall, as previously highlighted, a Satisfactory level of assurance and system for risk management and control. Whilst some residual risk, this does not significantly impact on achievement of council objectives.

Overall a good result for 2021/22 year.

The Independent Member said it was pleasing to see how many internal audits received satisfactory assurance, consistent with what audit find during the year.

At the request of the Independent Member the Audit, Risk and Governance Manager advised the aim was to have the 2 backlog audits completed this year, and if not, these 2 audits would be rolled into the new term and prioritised as part of the new term.

The Independent Member asked if it was anticipated that 100% could be achieved in the year 2022/23. The Audit, Risk and Governance Manager advised that whilst desirable anything over 75% was considered a good outcome and 87% had been achieved, explaining that difficulties with undertaking audits include availability of staff and sections not being able to accommodate an internal audit.

The Independent Member commented that given the bench mark was 75% reaching 87% was a commendable result for last year's work.

Councillor McMullan asked what plans were in place to ensure employment for disabled persons in relation to Labour Market Partnership report.

The Director of Corporate Services advised that policies and procedures allowed for employment of those with disabilities and agreed to bring a report showing applications versus successful appointments in this regard and advised that a piece of work was required to be completed in the first instance.

Alderman S McKillop asked for statistics showing the impact of absenteeism on productivity and said she had been assured by Moore NI this information would be provided in future audits.

The Director Corporate Services advised an audit on Absenteeism was undertaken in 2019 and agreed to follow up on any subsequent audits in this area.

6.4 NIAO Fraud Assessment Questionnaire 2021-22 – Completed Assessment

The Director of Corporate Services advised that the above, not included within the reports was available on request.

6.5 Managing Fraud Risk in a Changing Environment Self-Assessment Checklist 2021-22

The Director of Corporate Services advised that the above, not included within the reports was available on request.

6.6 Proper Arrangements Questionnaire 2021-22

The Director of Corporate Services advised that the above, not included within the reports was available on request.

7. INTERNAL AUDIT (MOORE NI)

7.1 Ballyreagh Golf Club

Report, previously circulated was presented by Internal Auditor, Moore (NI).

Internal Auditor, Moore NI advised of a Satisfactory level of assurance and pointed to an error in the table on page 2 which read 2 Priority 2 Recommendations and 2 Priority 3 however it should read 3 Priority 2 Recommendations and 1 Priority 3 Recommendation.

Priority 2 Recommendation - a licence agreement has been in existence but not been substantially reviewed since it was put in place in 1981 under Legacy Coleraine Borough Council. This was required to be reviewed and brought up to date with the Recommendation to ensure that all responsibilities around costs were clear in any amendment to the licence to agree.

Priority 2 Recommendation - ensure safeguarding policy of Council and safeguarding training is provided to anyone working at the Golf Club, due to the type of work undertaken it is important they understand the policy around Safeguarding.

Internal Auditor, Moore NI said that she was content with the income controls in place which she gave consideration to.

The Independent Member asked if there were other independent people connected with Council such as the Golf Professional who would need to be made aware of the policy and have the opportunity to receive training.

The Director of Corporate Services advised that Ballyreagh Golf Club was unique in this respect and all staff employed by Council, whether permanent or agency have thorough Safeguarding training. The Director of Corporate Services agreed to follow up and report back to the Audit Committee.

7.2 Arts and Culture Club

Report, previously circulated was presented by Internal Auditor, Moore (NI).

The audit focused on 2 centres and reviewed the controls around income and followed up on previous Recommendations regarding fixed asset register which revealed that one was not in place and the other required

updating. Internal Auditor, Moore NI said she was happy to report that there were now no issues.

Internal Auditor, Moore NI advised that strong controls were in place over income and only 2 minor Prior 3 Recommendations included within report.

7.3 Grants Management

Report, previously circulated was presented by Internal Auditor, Moore (NI).

Internal Auditor, Moore NI said that around October 2021 a new policy for reducing bureaucracy was implemented by Council. Council have improved in this regard and attempted to amend their processes and procedures in order that bureaucracy is not stifling. Grants awarded after this period were considered to see how new processes were bedding in. Despite the new initiative by grant funding unit, only minor issues were identified and the outcome was an overall Satisfactory level of assurance.

There were 7 Priority 3 Recommendations all of which were minor issues. Internal Auditor, Moore NI commended Council on attempts to reduce bureaucracy around small grants.

There were 2 Prior 2 Recommendations within the report.

Anti-fraud Bribery and Corruption policy requires more detail around implementation of policy and more detail regarding procedures to implement. The Recommendation has been accepted by management.

Of the six grant programmes sampled, one was managed in a way which deviated away from Council's regular policies and procedures. This increases risk of controls not being appropriately or adequately implemented. All actions have been accepted and will be implemented by management.

Councillor P McShane referred to the stupendous work within the grants team in this organisation.

Councillor McMullan referred to grants which also required Planning permission, raising concern that by the time Planning is approved, the timeline for the grant may have expired.

Internal Auditor, Moore NI said that the audit did not consider Capital Grants which was where planning permission would come be considered and was therefore not in the position to comment with regard to his query.

7.4 Performance Improvement Verification

Report, previously circulated was presented by Internal Auditor, Moore (NI).

This audit concentrated on verification of certain data and information which was used to measure performance improvement within Council

This year the focus was on verifying the data and a sample was taken of 2 of 5 objectives, each of which had 9 outcome targets, with the purpose of determining how accurate data was which measured these targets.

Audit found that accurate data was available for the sample selected but found there was some improvement needed in definition and design of some outcome targets used for performance improvement. Ways in which this could be improved is training on use of SMART targets and a joined up approach on Performance Management across Council. Performance Management Covers Corporate Planning, Business Planning, Performance Improvement and APSE indicators. The above are managed in different parts of Council where the skill is evident but there but not a joined up approach, better use needs to be made of the system Council has in place.

Internal Auditor, Moore NI commended Council on what had been undertaken but said there was a bit to go in terms of developing a platform for monitoring targets

Alderman S McKillop asked if it was possible to speak outside of the meeting with Internal Auditor, Moore NI regarding some of the matters raised, that as an Elected Member she would want assurance that problems are ironed out.

Internal Auditor, Moore NI provided further clarity for the Elected Member.
- The current Council structure has Corporate and Business Planning in one section of the Council structure and Performance Improvement in another. Both have very skilled and knowledgeable officers for this type of work with whom Internal Auditor, Moore NI has spoken to. It was agreed that more cross fertilisation in future was required. Internal Auditor, Moore NI stated that in an organisation and each section focusing on day to day work, it can prove difficult to find the time to work across Departments.

Internal Auditor, Moore NI agreed to meet Alderman S McKillop outside of the meeting and suggested this could be arranged through the Director of Corporate Services.

7.5 Prior Year Recommendations

Report, previously circulated was presented by Internal Auditor, Moore (NI).

Internal Auditor, Moore NI said that every year internal audit take a look back usually only at one year previously at whether recommendations are implemented and how well Council are addressing and progressing recommendations.

In addition consideration was given to look further back at some Priority 1 and 2 Recommendations sitting for a little bit of time. Consideration was given to all Recommendation 2020/2021 from Priority 1 – 3.

For the period from 2016 – 2020 Internal Auditor, Moore NI looked at Priority 1 and 2 Recommendation, as the most important ones hoping to find that they had been prioritised. On looking at 98 recommendations summarised on page 6 the Findings were pleasing with all Priority 1 Recommendations from the past and from last year, being fully addressed as some had been sitting for a few years.

50% of all Priority 2 Recommendations across all the years from 2016 had been addressed since this time last year and quite significant work undertaken.

52% of all Recommendations made last year had been fully addressed with 40% being addressed.

There were a number of areas picked up on in a report, where there needs to be a little bit more work done.

Certain recommendations linked into each other with the example of page 2 Recommendation made in 2017 – Asset Management Strategy or policy in place.

Every time consideration is given to operational areas, weaknesses in asset management result in further unnecessary recommendations. Until Priority 2 Recommendations are finally addressed from a central corporate position, the operational services will continue to have weaknesses picked up by Internal audit. It is therefore important to have Asset Management in place, where Council can wipe out up to 5 Recommendations in different areas.

Regarding Finance guidance and budget management, a Finance manual introduced and also in 2017 draft financial regulation created but not finalised or implemented and inconsistency between that and contents of the finance manual. This area needs to be looked at holistically to iron out inconsistencies and gaps, the medium term financial plan needs pushed through.

Internal Auditor, Moore NI said she was happy with progress and had seen a concerted effort made to address Recommendations.

The Independent Member said it was good to go back over the 5 year period as this gives assurance to Audit Committee that Recommendations are being taken forward and agreed that although the report was good, there was still work to be done. In particular, regarding Priority 2 Recommendations, the Independent Member asked Management to comment.

The Director of Corporate Services responded as follows:

Asset Management

Council currently have an Asset Management Strategy and Plans specific to service areas eg Estates/Land and Property but not an overarching strategy. Asset management is still to be developed with input required from different service areas and Directorates, including Finance and Estates.

Asset Management is being addressed and progressed but not complete just yet.

Medium Term Financial Planning

Council are addressing the Medium Term Financial Plan and the component parts are in final draft, but not formalised or finalised through Committee. There has been a lot of background work undertaken in reconciling capital spend and capital projects, commitments including what Council have signed up to at Stage 1, 2, 3 and 4, and building in cash flow/grants. A final document is expected in the next 3 – 6 months.

Council have appointed a Data Protection Officer to address governance and ICT issues. A lot of work ongoing regarding cyber security in light of threats and challenges. Council are working very hard in terms of Risk Management. Symptomatic of the labour market at this time there are positions remaining vacant and efforts are being made to try to fill or bridge gaps and where this unsuccessful, to look toward another model of service delivery.

Reporting will continue on a quarterly basis to provide an update on outstanding matters.

8. ANNUAL SELF-ASSESSMENT REPORT 2022/23

Report, previously circulated, was presented by the Audit, Risk and Governance Manager.

Purpose of the Report

To present a proposal to seek Members comments and approval of the completion of the 2022/23 self-assessment exercise on the effectiveness

of the Audit Committee on behalf of Elected Members via a Survey Monkey.

This report has been prepared for the Members of Causeway Coast and Glens Borough Council and should not be disclosed to any third party, quoted or referred to without prior written consent of the author.

Background

In line with good practice, Audit Committees should assess their effectiveness annually. The main source of guidance for public sector Audit Committees is HM Treasury's 'Audit and Risk Assurance Committee Handbook'. The National Audit Office has developed a standalone checklist that can be used to consider the effectiveness of Audit Committees. Committee members and other regular attendees should consider whether the Committee fulfils the detailed good practice questionnaire.

During Covid, internal audit took the lead on this exercise and identified 5 issues to be actioned which included:

- a) Accounting Officer to be asked to consider attending the audit committee annually in line with best practice.
- b) A conflict-of-interest declaration to be completed by the independent member appointed to the Audit Committee.
- c) Training for all members of the Audit Committee to be progressed.
- d) The Audit Committee's Terms of Reference to be reviewed to ensure that committee in compliance with the CIPFA Audit Handbook and HM Treasury Handbook 2016
- e) An Annual Report to be presented to the Audit Committee, timed to support the Governance Statement, presenting the work the Committee has done during the year.

All 5 actions identified have been addressed. It is best practice that the checklist should be completed by Member of the Committee.

It is recommended that the Causeway Coast and Glens Borough Council approves the use of a 'survey monkey' to fulfil the requirement for the Audit Committee to complete a self-assessment checklist on the performance of the Audit Committee for 2022/23.

If approval is obtained a 'Survey Monkey' will be issued to the Members of the Audit Committee for completion and a report brought back to the September audit committee in terms of performance and to identify areas upon which the Committee could improve.

The Audit, Risk and Governance Manager said it was good practice to complete self-assessment annually to ensure compliance and ability to function, the first of which was undertaken during the pandemic.

The outcome was a number of recommendations back to committee of actions to improve to ensure best practice. All 5 issues raised have now been actioned and implemented.

For 2022/23 the Officer recommends completion of tick box survey monkey survey by the Committee which will be circulated on conclusion of the meeting. Returns will be correlated into a report which will be presented to the Audit Committee in due course.

Proposed by Councillor P McShane
Seconded by Councillor Watton and

AGREED – to recommend that Causeway Coast and Glens Borough Council approve the use of a ‘survey monkey’ to fulfil the requirement for the Audit Committee to complete a self-assessment checklist on the performance of the Audit Committee for 2022/23.

9. DIRECT AWARD CONTRACTS

Report, previously circulated, was presented by the Director of Corporate Services who advised the report was for information.

Background

Causeway Coast and Glens Borough Council approved an updated Procurement Policy in March 2021.

Detail

The new policy addresses a number of recommendations that had been made in reference to the old policy. One such recommendation was the inclusion of guidance around single tender actions or Direct Award Contracts (DAC). The policy gives guidance and sets out a procedure to follow in such circumstances.

DAC Process

In all cases where council staff are considering the use of the award of a contract without competition, they must seek guidance from the procurement officer before proceeding as such an approach will be easily challenged in the courts unless rigorously supported by appropriate documentation and completed in accordance with the legislative requirements.

Authorisation required

When a member of council staff has spoken with the procurement officer - and discussed all the alternative options available - and wishes to proceed with the award of a contract without competition the staff member should seek approval of their approach from the Senior Management Team before seeking Council approval to award.

A detailed report should be completed by the member of staff requesting the contract award explaining their rationale and the consideration given

to all alternative options in conjunction with discussions between the staff member and the procurement officer. The template provided in Annexe 6 – Direct Award Contract Form, previously circulated, should be fully completed by the member of staff requesting the contract award.

Once completed, this document will require authorisation from the Senior Management Team before proceeding to the relevant committee for consideration. Upon agreement from the Council the staff member should contract the procurement officer to assist with the contract award to the chosen supplier.

DAC Approvals

The purpose of this short report is to inform members of those DAC's which have been approved since 1 January 2021 and these are listed below, it should be noted that none of these required Council approval at the point of award, table previously circulated.

10. PERFORMANCE IMPROVEMENT – AUDIT PROPOSALS FOR IMPROVEMENT QUARTERLY UPDATE

Report, previously circulated, was presented by the Director of Corporate Services who advised that the Head of Performance and Performance Manager were unavailable but she would take questions or comments on their behalf.

Purpose of Report

The purpose of this report is to provide Members with an update on the progress against the Proposals for Improvement from Performance Improvement Audits since 2019.

Background

The NI Audit Office, on an annual basis, publishes its Section 95 Audit and Assessment Report on Council's ongoing work to comply with its Performance Duty. A significant area of these reports is the Proposals for Improvement which highlight areas in which Council needs to demonstrate some progress to ensure its ongoing compliance with the Performance Duty. This report acts as a quarterly update against these proposals.

Quarterly update

Attached at Annex 1, previously circulated, an update report on the current progress against Audit report Proposals for Improvement.

It is recommended that the Audit Committee notes the contents of This report and uses this opportunity to raise any relevant questions or concerns.

11. ABSENCE REPORT YEAR END 2022

Report, previously circulated, was presented by the Director of Corporate Services.

Purpose of Report

The purpose of this report is to provide Members with Year End 2022 (1 March 2021 to 31 March 2022) information regarding Absenteeism throughout the Council.

Background

Absenteeism within the Council is closely monitored and managed in accordance with Policies and Procedures, and in line with NJC Terms and Conditions.

ODHR Business Partners work closely with each of the Directors, Managers and Supervisors to assist and support through a range of preventative proactive measures alongside the reactive to include referrals to Occupational Health, absence review meetings, referrals for Ill Health Retirement.

Performance Improvement Plan 2021/2022

Progress to date (1 April 2021 – 31 March 2022) Objective 1, Performance Improvement Plan

Outputs

- Council's newly revised Sickness Absence Policy came into effect on 1st July 2020.
- To date 116 line managers and 264 employees have been trained on the new policy (total 380 employees).
- Face to Face training is required in some front line service areas, however in line with increasing cases of COVID 19, the training was postponed. In line with relaxing restrictions, ODHR will work with the relevant managers and supervisors to organise this training.
- Work is ongoing with stakeholders to identify and agree further measures to support employees such as access to private Health Care, access to specific treatments, health insurance etc.
- In light of COVID-19 Occupational Health appointments are mostly by telephone, however face to face appointments can be arranged if required.
- Councils' highest reason for sickness absence is the Sickness Category including conditions such as Stress, depression, mental health and fatigue syndrome. However, it is noted there is a reduction of 1,043.72 days from the 2019/20 figures (See Table 4 for further analysis).

- Employees who are absent due to a stress or a stress related absence are referred immediately to Occupational Health so that interventions can be put in place at an early stage. Employees are also reminded of the counselling services provided by Inspire. Additionally, Council continue to provide more in-depth Counselling services, as recommended by Occupational Health.
- In Quarter 4, 49 counselling sessions were provided by Inspire. This brings the year-end total to 114 counselling sessions.
- Regional health and well-being initiatives also included the 'One Billion Steps' Challenge, with individual staff members and teams participating.
- ODHR have now implemented the **Staywell** Well Hub which is a regional Local Government initiative to support wellbeing and has supported by a training programme for employees.
- ODHR work closely with the PR department providing wellbeing content for the weekly Staff News, covering a variety of topics in relation to general health and wellbeing including Mental Health.
- Council are mindful of the unique and difficult time we are working in and have been providing practical advice and solutions for staff who continue to work from home. Further details provided in Section 6.

Outcomes

Please Note: As 2020/21 has not been a usual year due to the COVID 19 Pandemic, the sickness figures from the previous year (2019/20 actuals) will be used as a baseline to report against)

- A 2.75% reduction in the number of days lost to Council through long term sickness (*9,510.23 in Q4 2019/20, target 9,248.70 days in 2021/22, actual reduction 635.11 days*)
- A 2.5% reduction in the average number of days lost per employee through sickness absenteeism (*17.82 days per employee in Q4 2019/20, target 17.37 in 2021/22, actual 17.03 days per employee*)
- We will maintain the average time for an Occupational Health Review from 4 weeks to 2 weeks.

Quarter 4 Performance Against Targets

Tables, previously circulated as follows:-

Table 1 - Quarter 4 Performance Against Targets and in-Year Comparisons

Table 2 – Analysis of Absenteeism Data

Table 3 – Top 5 reasons for Absence

Table 4 – Analysis of Stress and Stress Related Absences

Table 5 - Analysis of the Cost of Absence

Mental Health and Wellbeing Strategy and Action Plan

The Council have been involved in the development of a Mental Health and Wellbeing Strategy and Action Plan. This Strategy has been developed to guide the work of the Local Government in the longer term, and to focus on the action plan for 2020 - 2023. The Vision for the Strategy is based on the acronym ASK:

Accept

One of the key messages to come out of the consultation was the need to accept that anyone at any level in Councils and the NIHE can have poor mental health, and to work towards a culture where mental health can be discussed openly. As organisations, we need to demonstrate a visible commitment to mental health in the workplace by providing an environment where individuals feel accepted and safe to speak openly about mental health including their personal experiences.

Support

The Group seeks to ensure that individuals in Councils and the NIHE feel supported in relation to their health and wellbeing and that, if they are experiencing poor mental health, they know how and where to access support.

Knowledge

Mental health is about wellness rather than illness and is not merely the absence of a mental health condition. Mental health exists on a continuum, or range: from positive, healthy functioning at one end through to severe symptoms of mental health conditions at the other. The Group seeks to support individuals at all levels in Councils and the NIHE to have access to the knowledge and tools to support anyone experiencing poor mental health and create healthy workplaces.

Support provided to Staff during year – COVID arrangements

- Flexible working arrangements available such as parental leave, special leave, annual leave, toil and flexi
- Encouraging staff to have breaks during the day and to take annual leave
- Importance of regular staff contact/communication using methods such as WhatsApp, MS Teams, Phone calls, Staff Newsletter
- Initiatives from Inspire
- Health and Well Being Groups Walking Challenge
- Regional Well Being initiatives such as 'One Billion Steps'
- Stress Control Classes through Health Trusts delivered by professionals offering suggestions/advice/support, and providing staff time to attend same
- Supervisors and Managers applying practical and sensible solutions, managing workloads and priorities, whilst delivering services, mindful of public and expectations

- The Agile Working Policy has been approved by Council. A programme of training has been delivered to Managers and Supervisors, with 84 managers and 210 employees trained (294 in total). An implementation date has not yet been agreed in line with the Executives guidance to work from home where possible.
- Health Plan Provision currently being considered by Council.

This quarterly report will continue to be provided to Audit Committee, and the information will also be feed through Council's Performance Improvement Plan.

It is recommended that Council notes the report presented.

The Director of Corporate Services advised the absence report contained more statistics than were available in previous report. Council are measuring absence in line with their Performance Improvement Plan.

Page 3 shows Q4 performance which takes in average number of days lost per employee through sickness and number of days lost to Council through long terms sickness. The target of 2.5% has been achieved for year-end 2022.

Regarding a breakdown, table 2 looks at the number of employees with 1 or more absence during year and number of periods of absence and this has reduced significantly.

Also included is the number of full time employees without absence which is quite often missed when recording statistics and the number of employees with no absence has increased. Long term absence remains a problem with short term a lesser percentage. Some of the reasons for long term absence is stress, depression, mental health, fatigue syndrome and these cover a wide range of conditions, although this has reduced by just over 5% in the past year.

Whilst there has been a reduction, Council are working hard to keep figures down and do what it can to be proactive and reactive and continue to support staff on sick leave.

A report presented at Council Meeting on 7th June through Corporate Policy and Resources Committee considers looking at health plan provision to include referrals for MRI scans and physio for conditions which often result in lengthy sick leave. This completes the update for full year's figures and statistics.

Independent Member welcomed the reduction but said she believed a lot more work could be done and asked how much of the reduction illustrated was down to management effort and procedures in place versus Covid and varying ways in which individuals took absence.

The Director of Corporate Services said it was difficult to analyse to those levels and provided a few examples where COVID had impacted on waiting times for treatment and surgery.

The Director of Corporate Services commented that quite often after surgery or treatment, employees are unable to take up their substantive post or any other post in a timely manner due for the need to recuperate and recover.

The Director of Corporate Services further commented that Occupational Health/General Practitioners and/or Medical Professional advice was sought and followed to enable absent employees to return to work.

12. MATTERS FOR REPORTING TO PARTNERSHIP PANEL

There were no matters for reporting to the Partnership Panel.

13. CORRESPONDENCE

Correspondence, presented as read by The Director of Corporate Services.

13.1 Colette Kane, Northern Ireland Audit Office (correspondence dated 20th May 2022)

The Northern Ireland Audit Office has been undertaking preliminary work, and has been in contact with officials within some of the Councils, as well as the Department of Agriculture, Environment and Rural Affairs. This work has now been completed and agreed that a full study review should now be undertaken. It is the intention to publish this report in Spring/Summer 2023. In particular, it would be useful to agree the arrangements to manage requests for information covering the large number of organisations who deliver the waste management system. Council are asked to appoint a Senior Responsible Officer e.g. Head of Waste Management within your organisation who could meet with the team and facilitate our audit work.

The Director of Corporate Services advised that Council would appoint an appropriate senior officer to take forward accordingly.

MOTION TO PROCEED 'IN COMMITTEE'

Proposed by Councillor Watton
Seconded by Councillor McMullan

AGREED - to recommend that Council move '*In Committee*'.

* **Press were disconnected from the meeting at 8.15pm.**

The information contained in the following item is restricted in accordance with Part 1 of Schedule 6 of the Local Government Act (Northern Ireland) 2014.

14. CORPORATE RISK MATRIX

Confidential report, previously circulated was presented by The Director of Corporate Services.

The Director of Corporate Services advised the Matrix devised from Head of Service level up to Senior Leadership Team and the report presented and considered with regard to risk to the organisation not meeting its objectives. Outlined was the risk description, inherent risk and risk reducing measures in place, along with residual risk.

After the quarterly review, Senior Leadership Team agreed the top 5 Risks to Council at this time, marked in red within the report which included Finance, Cyber security, Compliance and Regulation, Recruitment and Pay, Reputation and Economic Recovery.

Councillor P McShane indicated he had requested a matter to be considered at this Item but was advised that it should be discussed at another committee.

15. LEGAL CASES ACTIVITY

Confidential report, previously circulated was presented by the Director of Corporate Services.

Introduction

The purpose of this report is to identify potential future liabilities and areas of concern, and provide Members with a Quarterly update on the Legal cases activity, which are being dealt with “in-house” including the number of active legal cases, split between Directorate, the number of new cases, and the number of closed cases.

Position as at May 2022

The table circulated provided information on number of cases open and closed across the service areas during the period 1st June 2021 to 19th May 2022.

The above figures do not include First Registrations (Appendix 1) and Car Parks (Appendix 2, previously circulated), General advice sought from the Legal Services

Team and Legal cases which are being dealt with by External providers.

It is recommended that Audit Committee note the Legal Cases Activity Report.

The Director of Corporate Services advised the report detailed a high level summary of the number of cases open and closed including First Registration of Council land, and registration of Council car parks.

The Director of Corporate Services advised that more detail would be provided through the quarterly report to the Land and Property Sub Committee and members were referred to the Members' Portal also.

Councillor Watton welcomed confirmation of the status in terms of ownership of Ballymoney Town Clock.

16. WHISTLE BLOWING /FRAUD

Verbal update was presented by the Audit, Risk and Governance Manager who advised there were no new cases of fraud or whistle blowing to report in this quarter; Two matters were raised through internal audit, neither have been progressed for formal investigations.

17. RETENDER OF INTERNAL AUDIT CONTRACT (CO-SOURCING)

Confidential report, previously circulated, was presented by the Audit, Risk and Governance Manager.

Purpose of the Report

To present an update on the internal audit contract for the co-sourcing partner arrangements to deliver the annual internal audit plan of work.

This report has been prepared for the Members of Causeway Coast and Glens Borough Council and should not be disclosed to any third party, quoted or referred to without prior written consent of the author.

It is recommended that the Causeway Coast and Glens Borough Council approves that the Council go out to re-tender the contract for the annual delivery of Internal Audit for the Council to fulfil its statutory obligations.

The Audit, Risk and Governance Manager advised Moore NI have indicated they may not be in a position to deliver on internal audit contract for next financial year.

The Audit, Risk and Governance Officer said she wished to take this opportunity to thank the Internal Auditor, Moore NI for her commendable work since inception of Causeway Coast and Glens Borough and extended her best wishes.

The Chair added his good wishes and thanks to Internal Auditor, Moore NI.

Proposed by Councillor Watton
Seconded by Alderman S McKillop and

AGREED – to recommend that Causeway Coast and Glens Borough Council go out to re-tender the contract for the annual delivery of Internal Audit for the Council to fulfil its statutory obligations.

18. ANY OTHER RELEVANT BUSINESS (NOTIFIED IN ACCORDANCE WITH STANDING ORDER 12(O))

None

19. DATE OF NEXT MEETING

The date of the next meeting is Wednesday 21st September 2022 at 7 pm.

MOTION TO PROCEED ‘IN PUBLIC’

Proposed by Councillor Watton
Seconded by Alderman S McKillop and

AGREED – that Audit Committee move ‘*In Public*’.

This being all the business, The Chair thanked those in attendance and the meeting concluded at 8.30pm

Chair