

**Audit: Project Management Framework (PMF)**

**Introduction:**

Projects are mechanisms for changing services and the organisation. They need to be well managed to ensure that they deliver their intended benefits, to time and to budget. All projects involve risk and good practice management identifies and manages the risks involved with projects undertaken. The council has a number of projects which vary in scale and the council has adopted a project management framework in order to identify and manage these projects which are retained on the project 'SharePoint' system. The audit will review this framework and also the programme board's responsibility in delivery of the projects.

Risk identified:	Level of Control:	Overall opinion:	Recommendations:
<p><b>Legislative and Policy Compliance (LPC)</b></p> <p><b>LPC1:</b> A framework for the management of key projects has not been established and therefore the council is not in control of key changes to its services and organisation.</p> <p><b>LPC2:</b> The SharePoint system should not retain data for longer than required.</p>	<p>Satisfactory</p>	<p><b>LPC1:</b> The council's project management framework was established in December 2015 and incorporates a range of documents and guidance for officers involved in leading projects. Key council projects, including the Public Services Centre refurbishment and New Leisure Centre have all been successfully delivered through this framework.</p> <p>The supporting guidance clearly defines the stages of project management that must be followed. Since its introduction in 2015, new processes and legislation have been introduced and it is therefore recommended that a review of the project management guidance be carried out to ensure this is up-to-date and aligns to council policy e.g. risk management strategy and GDPR privacy and retention guidelines [R1].</p> <p><b>LPC2:</b> SharePoint is the document management system used to store all documents completed as part of the project management framework. Retention periods for these documents have been established as part of the council's corporate retention schedule which is currently being developed.</p>	<p><b>R1</b> <i>Recommendation priority:</i> Medium</p> <p><i>Implementation date:</i> September 2019</p> <p><i>Responsible Officer:</i> Corporate Services Manager</p> <p><i>Recommendation Details:</i> The project management guidance should be reviewed to ensure it is up-to-date and reflects the council's latest risk management strategy and GDPR privacy and retention guidelines. This should include the ability for Equality and Privacy Impact assessments to be captured within SharePoint.</p>

<p><b>Operational (O):</b></p> <p><b>O1:</b> Officers involved in the management of projects (sponsor and deliverer) have not been appropriately trained, leading to framework procedures being omitted and the potential for projects to stall.</p> <p><b>O2:</b> The SharePoint system is not maintained and information entered is not complete leading to lack of clarity concerning the delivery of the project.</p> <p><b>O3:</b> SharePoint does not contain a complete record of all projects linked to the project management framework (either as live or as a horizon project) and therefore projects are not being appropriately managed through the programme board.</p>	<p>Limited</p>	<p><b>O1:</b> Day to day support and guidance on the framework procedures is available from the Corporate Services Officer. Discussions during the audit established that not all officers had accessed the guidance provided; and this has led to some inconsistencies in the way framework procedures have been applied i.e. completion of horizon forms, lack of risk registers and privacy impact assessments. It would therefore be beneficial for training to be provided to all officers involved in project delivery <b>[R2]</b>.</p> <p><b>O2:</b> Assurance was obtained that the SharePoint system is being maintained. In terms of its completeness, the audit identified that risk registers had not been completed for all projects. In line with the councils risk management strategy and to demonstrate good project management practice, it is recommended that risk registers be completed for all projects on the framework <b>[R3]</b>.</p> <p><b>O3:</b> There is assurance that the vast majority of corporate projects are identified through the frameworks horizon and project initiation forms. In order to give added assurance that all projects are captured, it is recommended that an annual review of service plan objectives be carried out <b>[R4]</b>.</p>	<p><b>R2:</b> <u>Recommendation priority:</u> Medium <u>Implementation date:</u> October 2019 <u>Responsible Officer:</u> Corporate Services Manager <u>Recommendation Details:</u> Training on the project management framework, including risk management, should be provided to all officers involved in project delivery. Formal project management training should also be offered where appropriate.</p> <p><b>R3:</b> <u>Recommendation priority:</u> Medium <u>Implementation date:</u> August 2019 <u>Responsible Officer:</u> Corporate Services Manager <u>Recommendation Details:</u> Risk registers should completed for all new projects on the framework. These should be reviewed on a regular basis by the board to ensure that key risks in the life of the project have been identified and mitigating controls are in place.</p> <p><b>R4:</b> <u>Recommendation priority:</u> Low <u>Implementation date:</u> September 2019 <u>Responsible Officer:</u> Corporate Services Officer <u>Recommendation Details:</u> An annual review of service plans should be carried out in order to ensure all potential projects are identified and horizon forms should be completed in all cases.</p>
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<p><b>O4:</b> The projects listed on SharePoint (either as live or a horizon project) do not meet the definitions of key corporate projects as stated within the project management framework guidance and therefore the board's time and resources is not being allocated appropriately.</p> <p><b>O5:</b> The role of the programme board as defined within the project management framework is not being delivered, and therefore projects could overrun, be overspent or not delivered.</p>		<p><b>O4:</b> The framework sets out a clear set of criteria which defines a project. There is a satisfactory level of assurance that all projects on the framework meet this criteria. It is acknowledged that there are a number of larger projects relating to growth which Programme Board have agreed will have their own governance arrangements in place.</p> <p><b>O5:</b> There is assurance that the role of Programme Board is being delivered. A review of the eight-weekly meetings gave assurance that the Board provides adequate challenge. Meetings currently focus on projects that have an 'amber' or 'red' overall status and it is recommended that an additional assurance process is introduced whereby on a rolling basis, projects with a 'green' overall status are escalated to Programme Board for challenge <b>[R5]</b>.</p>	<p><b>R5:</b> <i>Recommendation priority:</i> Low</p> <p><i>Implementation date:</i> September 2019</p> <p><i>Responsible Officer:</i> Corporate Services Officer</p> <p><i>Recommendation Details:</i> On a rolling basis, projects where the overall status is 'green' should be reviewed by Programme Board to ensure all projects are regularly reviewed. Consideration should also be given for a pre-briefing with the chair of Programme Board to raise any areas of concern.</p> <p><b>Agreed action:</b> Project values should be updated on the SharePoint homepage.</p>
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## Audit: Ubico Health and Safety Monitoring

### Introduction:

This audit was completed as part of the 2018/19 Internal Audit Plan. The council has contractual requirements of UBICO to deliver its services in a way that protects the health and safety of the public and the staff. Under the Health and Safety Executive (HSE) – the government’s regulatory body whose aim is to prevent workplace death, injury or ill health – guidance for waste services notes that the contract arrangements need to include a robust framework for the client’s monitoring and review of the contractor’s health and safety practice and performance. Furthermore, the Waste Industry Safety and Health Forum (WISH) provides safety information specific to the waste industry and in this connection has provided a guidance checklist in relation to effective proactive monitoring of waste and recycling collection activities. This audit sought to provide assurance that the council’s client monitoring processes ensures that health and safety obligations both noted within the Ubico contract and implied under Health and Safety legislation were being met.

Risk identified:	Level of Control:	Overall opinion:	Recommendations:
<p><b>Legislative and Policy Compliance (LPC):</b></p> <p><b>LPC1:</b> The health and safety contract obligations are not being adhered, potentially leading to the council being apportioned with liability in the case of a claim/prosecution</p>	<p>Satisfactory</p>	<p>The council’s contract with Ubico includes a number of Health and Safety obligations. Adequate monitoring arrangements are in place to ensure that these are being met. This is achieved through:</p> <ul style="list-style-type: none"> <li>- Contract monitoring meetings- these include health &amp; safety reports and risk register updates.</li> <li>- Environmental Services Partnership Board- these include service risk register updates and health and safety reports.</li> <li>- Monthly management reports- these include health and safety statistics.</li> <li>- Quarterly Management Team updates- these include an overview of health and safety performance.</li> <li>- Six-monthly updates to Overview &amp; Scrutiny Committee- these include health and safety statistics.</li> <li>- Annual health and safety report- this is produced by the Joint Waste Team and includes a summary of incidents reported by Ubico.</li> </ul> <p>In order to strengthen the monitoring process further, the service risk register, presented to the ESPB meetings, should include evidence of resolutions to the risks identified and target dates should be agreed in respect of their completion <b>[R1]</b>.</p> <p>It is acknowledged that maintaining high standards for Health and Safety is a key priority for Ubico, as outlined in their 2019-20 Business Plan. A restructure within the company in 2018 saw the creation of a ‘Head of Compliance’ post to ensure risk assessments are being followed and executed appropriately. Following this, Ubico achieved the International Standards for Health &amp; Safety (ISO45001)</p>	<p><b>R1</b> <i>Recommendation priority:</i> Low <i>Implementation date:</i> October 2019 <i>Responsible Officer:</i> Joint Waste Team Officer and Grounds Maintenance Project Officer</p> <p><i>Recommendation Details:</i> Evidence of the resolutions to risks identified within the service risk register should be requested and target dates agreed in respect of their completion.</p> <p><b>R2</b> <i>Recommendation priority:</i> Low <i>Implementation date:</i> July 2020 <i>Responsible Officer:</i> Joint Waste Team Officer and Grounds Maintenance Project Officer</p> <p><i>Recommendation Details:</i> Copies of all health and safety audit reports should be requested to obtain assurance that any recommendations have been implemented.</p>

		<p>in April 2019. Ubico are subject to regular audit review and receipt of these reports should be requested in order for the council to obtain assurance that any health and safety recommendations have been implemented <b>[R2]</b>.</p>	
<p><b>Operational:</b></p> <p><b>O1:</b> A framework for the monitoring and review of Ubico's health and safety practice and performance is not operational and therefore the council is unaware of potential safety issues which could lead to liability being apportioned to the council in the event of a claim/prosecution</p>	<p>Satisfactory</p>	<p>In addition to the contract monitoring carried out above; the Grounds Maintenance Project Officer and Joint Waste Team Officer (monitoring officers) both review Ubico operational activities on a regular basis e.g. through crew checks in conjunction with Ubico Supervisors. These officers have the ability to escalate any immediate health and safety concerns promptly to Ubico.</p> <p>Monitoring officers also have a relationship with the council's Health and Safety Officer and information concerning Ubico's health and safety performance is provided to this officer on a quarterly basis.</p> <p>Risk assessments and safe systems of work are in place for key operational activities. In order to further improve the monitoring of these risk assessments from a client perspective, a full overview of all completed risk assessments against each operational activity should be requested from Ubico, this should include review dates in order for effective monitoring to take place <b>[R3]</b>.</p> <p>A review of the contract highlighted that evidence of regular health and safety checks on bring sites was not being received by monitoring officers. It is therefore recommended that these be instructed to take place <b>[R4]</b>.</p>	<p><b>R3</b> <i>Recommendation priority:</i> Medium <i>Implementation date:</i> October 2019 <i>Responsible Officer:</i> Joint Waste Officer and Grounds Maintenance Project Officer</p> <p><i>Recommendation Details:</i> An overview of all completed risk assessments and safe systems of work against each operational activity should be requested from Ubico, this should include review dates in order for effective monitoring to take place.</p> <p><b>R4</b> <i>Recommendation priority:</i> Medium <i>Implementation date:</i> September 2019 <i>Responsible Officer:</i> <u>Head of Community Services</u></p> <p><i>Recommendation Details:</i> In accordance with the contract, Ubico should be instructed to undertake regular health and safety checks on bring sites that are open to the public and details of these checks be provided to monitoring officers.</p>

## CORPORATE IMPROVEMENT WORK

### GDPR

Data protection regulations require that the council retains retention schedules which identify how long different types of documentation (e.g. contracts, licences) are kept for. A decision has been made to have a corporate retention schedule that will be linked to the privacy statements and be made available on the council's website. Internal audit corporate improvement work has been focussed on reviewing current retention schedules with service managers to ensure that they are robust and amalgamating this information into one corporate document. Targeted completion is July 2019.

### Financial Procedural Rules checklist

The council's constitution including its financial procedure rules have been updated. Internal audit corporate improvement work involved the establishment of two checklists, one for Heads of Service and one for staff. The checklists provide details on the key responsibilities concerning these rules and also provide additional guidance on how to interpret these rules. Succinctly, they are sanitised version of the more detailed rules, covering the more common themes and operational activities.

### Recommendations Rating

Priority:	Definition:
1 <b>High</b>	A fundamental weakness in the system that puts the Authority at risk. This might include non-compliance with legislation or council policy, or may result in major risk of loss or damage to council assets, information or reputation. Requires action as a matter of urgency; to be addressed within a 3-6 month timeframe wherever possible or within an extended time frame as agreed with Internal Audit if the recommendation requires extensive resources or time.
2 <b>Medium</b>	Observations refer mainly to issues that have an important effect on the system of internal control but do not require immediate action. Legislation or policy are unlikely to be breached as a consequence of these issues, although could cause limited loss of assets, information or adverse publicity or embarrassment. Internal audit suggest improvement to system design to minimise risk and/or improve efficiency of service. To be resolved within a 6-9 month timescale.
3 <b>Low</b>	Observations refer to issues that would if corrected, improve internal control in general and ensure good practice, but are not vital to the overall system of internal control. A desirable improvement to the system, to be introduced within a 9-12 month period.

**Level of control**

Level of control:	Definition:	Guidance:
<b>Good</b>	Significant assurance- There is a sound system of control, and the controls are being consistently applied. Limited scope for improving existing arrangements. Significant action unlikely to be required.	No audit recommendations or no more than 3 low priority (3) recommendations.
<b>Satisfactory</b>	Reasonable assurance- There is a sound system of control, and the controls are generally being consistently applied. However, there are some minor weaknesses in control, and/or evidence of non-compliance.	No more than 2 medium priority (2) recommendations, possibly with some low (3) recommendations.
<b>Limited</b>	Limited assurance- Lapses in the framework of control in a number of areas, and/or evidence of significant non-compliance.	Between 1 and 3 high priority (1) and possibly several other priority recommendations OR 3 or more medium (2) recommendations.
<b>Unsatisfactory</b>	Inadequate assurance- The system of control is weak, and/or there is evidence of significant non-compliance, which exposes the council to the risk of significant error or unauthorised activity.	4 or more Priority 1s OR 6 or more medium priority (2) recommendations.