## **Limited Assurance**

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Management and Control of Void Dwellings	June 2013	The objective of this follow up audit was to assess the progress in implementing the agreed recommendations at the conclusion of the original audit finalised in June 2012.	Extensive	Limited
Follow-Up Audit		Our testing showed that only one out of the six recommendations previously agreed had been fully implemented.		
		Testing of a sample of 10 dwellings which became void in the last six months, showed that only four had the V2 forms signed and had dates that were in line with the dates shown on SX3 system. Gaps were still present in the audit trail as not all V2 forms were being scanned on Comino. In order to address the issue of poor audit trail, we recommended in the original audit that a system of 'tick sheet' should be introduced within each tenant file that would list all of the key documents that must be on file. However, we found that the 'tick sheet' had not been fully implemented and was lacking in many of cases in the audit sample. The lack of tick sheet meant that essential components in the management and control of void dwellings were absent, leaving an incomplete audit trail. This could increase the risk of poor data quality in the control and monitoring of void dwellings. In addition, we found that only one out of 10 voids tested had both the electricity and gas safety certificates present on Comino and within the correct dates as required. Although SX3 system recorded the dates that the keys were returned, only two of the 10 cases had a copy of the Void Keys Record Sheet held within the Comino System. Of the 2 key logs present, only 1 was fully complete and related back to the dates found on SX3.  All findings and recommendations were agreed with the Acting Director of Neighbourhood Services and a copy of the final report was issued to the Tower Hamlets Homes, Chief Executive.		

#### **Management Comments**

Following the first audit recommendations into void management, training and practice changes were made within Tower Hamlets Homes; however as the follow up audit reveals the recommendations have not been fully implemented. The key recommendations concern the need for rigour in recording the management of void dwellings and Tower hamlets homes determined the remaining shortfalls shown in the follow up audit will not continue. We have therefore taken the following actions covering the six high priority recommendations:-

The Head of Neighbourhoods has ensured that all LBTH Internal Audit recommendations are embedded by instructing staff to;-

- 1. Record on the SX3 system the date the tenant has signed V2 Tenancy Termination Form and served notice on THH or where relevant, the date that THH have served notice on the tenant.
- 2. To consistently have a tick sheet within each file that lists all of the key documents that should be in the file.
- 3. That key documents will always include gas and electricity inspection certificates, and copy of the void keys record sheet.
- 4. Tick sheets will be retained by the originating officer to verify the scanned documents are correct.
- 5. Pre termination inspections to be carried out in all cases where relevant.
- 6. The void process has been reviewed and additional training undertaken.

This change process was subject to the issuing of a clear process change instruction and guidance to staff; and this is being supported by ongoing monthly sample checks by Team Leaders and Neighbourhood Area Manager of files scanned in that month to confirm compliance with instructions issued. Refresher training will be provided to all staff on SX3 and Northgate void modules. In addition, one officer in each area housing office is now responsible for co-ordinating all void activities, checking that all key documents were available and carry out the scanning of these key documents including the "tick sheet" onto Comino.

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
ICT Governance	June 2013	The objective of the audit was to provide assurance as to whether the systems of control for governance of ICT were sound, secure and adequate.	Extensive	Limited
Systems Audit		The main weaknesses were as follows:-		
		<ul> <li>Although there is risk management process operated within ICT, further improvements were required in the recording, monitoring and reporting of pertinent risks.</li> </ul>		
		The Information Management Strategy (IMS) dated 2010 was in draft. There was a second IT strategy document which was included within the Agilisys Operational Service Agreement (OSA) dated April 2012. Whilst there was some overlap between the two documents, they were not specifically aligned and it was unclear which (if any) document took precedence and whether they had been approved.		
		There was no formal information security awareness programme including formal acceptance by staff that they agree to abide by the terms of the IT policies upon joining the Council and education of staff in the requirements of the information security policy when they start their employment.		
		IT policies, including the Information Security Policy and the Internet, Intranet and E-mail policy, are not subject to regular (i.e. annual) review.		
		All findings and recommendations were agreed with the Business Solutions Architect and reported to the Service Head, ICT and Customer Access and the Acting Corporate Director, Resources.		

#### **Management Comments**

A new JCAD structure for the ICT Partnership, including the Client Team has been agreed and implemented within JCAD. JCAD access has been provided to all members of the Client Team and to the Agilisys management team. The risks identified during the Client Team Risk Management workshop facilitated by Strategic Risk Advisor have been reviewed, consolidated and assigned an agreed owner. During July the resulting risks have been loaded into JCAD. These risks will be subject to monthly review by the Client Team to ensure that the risk and controls identified are appropriate and that the identified JCAD reviews are being documented.

Due to the higher priority Smarter Working and PSN Security/Remediation work the creation and communication of an updated IT Strategy has been delayed, however, the Client Team and Agilisys are commencing the process of documenting the Technology Roadmap for LBTH this will be communicated to CMT and Directorate SMT's by the Client team.

The information Governance team is in the process of reviewing the approach to Information Security induction and awareness education.

The Information Security Policy is in the process of being updated and will be completed as a part of the GCSx/PSN Remediation programme submission due by 24/08/13.

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Thomas Buxton School	July 2013	The audit was designed to ensure that there were adequate and effective controls over the administration and financial management of the school. Our review confirmed that the school had a Full Governing Body which had overall responsibility for financial planning and control. The school generally had effective controls over the collection and recording of income received. The school had adequate risk management and insurance arrangements in place.	Moderate	Limited
		The main recommendations were as follows:-		
		<ul> <li>All Governing Body and Sub-Committee meetings should be minuted and copies of minutes retained by the school. The minutes should provide an appropriate level of detail to outline attendees, issues discussed, reports presented and decisions made as well as highlighting ratification of policies. The minutes should be signed by the Chair of the Governing Body or relevant Committee at the next meeting as an accurate record of discussions and should be presented to the next meeting of the Governing Body.</li> <li>Petty cash and staff expense claim forms should be fully completed and certified before any claim is reimbursed. The total of the claim should not exceed those amounts permitted to be paid by cash / cheque. Claim forms should be signed by the claimant as a true and accurate record of the expenses being claimed and should be certified by an independent, authorised signatory. All claim forms should be retained on file.</li> <li>Declarations of interest should be obtained for all Governors and staff with financial responsibilities on an annual basis. Where Governors or staff have no interests to declare, nil returns should be completed.</li> <li>Official order forms should be raised and authorised for all purchases, where appropriate, and retained on file. Furthermore all order forms should state a valid budget code.</li> <li>Deliveries should be checked by the receiving officer. The delivery note should be signed off and dated by the receiving officer to confirm that the goods have been checked and agreed to the original order form.</li> <li>All findings and recommendations were agreed with the Head Teacher and reported to the Chair of Governors and the Acting Corporate Director – Education, Social Care and Wellbeing.</li> </ul>		

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Marion Richardson Primary School	June 2013	The audit was designed to ensure that there were adequate and effective controls over the administration and financial management of the school. Our review confirmed that the school had a Full Governing Body and a Finance Committee which had overall responsibility for financial planning and control. The school follows good practice for the accounting of income and expenditure and generally had effective controls over the collection and recording of income received, and procurement. The school had adequate risk management and insurance arrangements in place.	Moderate	Limited
I		The main recommendations were as follows:-		
		<ul> <li>The Scheme of Delegation document should be reviewed and updated so that it reflects current work practices and mirrors the bank mandate. In addition, timesheets should be certified by an authorised signatory. If responsibility is to be delegated to other officers, the Scheme of Delegation should be updated accordingly.</li> <li>The terms of reference for the Finance Committee should detail the frequency of meetings and the number of members required to be quorate. Furthermore, the meetings should be fully minuted to provide an appropriate level of detail to outline issues discussed and decisions made.</li> <li>Governing Body meetings should be fully minuted. The minutes should provide an appropriate level of detail, evidencing the issues discussed and the decisions made as well as highlighting ratification of policies.</li> <li>In line with guidance provided via the Council, the school should seek advice before entering into and/or extending lease agreements.</li> <li>Purchase orders should be raised and authorised for all purchases (where appropriate) and retained on file.</li> <li>The School Fund monies should be subject to an annual audit.</li> </ul>		
		All findings and recommendations were agreed with the Head Teacher and reported to the Chair of Governors and the Acting Corporate Director – Education, Social Care and Wellbeing.		

### **Management Comments**

The Children, Schools and Families (CSF) Directorate have put the following systems and processes in place:-

- Internal audit reports on schools are now a regular item on the DMT agenda for discussion.
- Internal audit reports are used by CSF schools Finance team to feed into systems to determine schools requiring priority support.
- Internal Audit assurance rating is used to target specific support to schools.

In addition, necessary intervention is put in place by CSF Finance to assist and support schools in improving governance, financial management and control in specific areas of business activities.

#### Comments:

The schools have acted immediately and agreed to complete all actions with a defined timeframe.

The school and the governing body are fully commit to the recommendations made in the Audit report by:

- by tracking all actions within the timeframe provided in the report, including evidence of actions taken where appropriate
- confirming additional steps that the school are planning to take in light of the audit findings
- to take immediate action in mitigating exposure to risks arising from weaknesses in the control environment

Schools Finance manager has contacted the school and their bursar to review and support the school in its recommendations.

### **Substantial Assurance**

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Housing and Council Tax Benefits	July 2013	The main objectives of the audit were to provide assurance to management on whether the systems of control are sound, secure and adequate and also to evaluate the potential consequences which could arise from any weaknesses in internal control procedures.	Extensive	Substantial
		The sole weakness identified was that the Council tenant and private tenant claimant reconciliations could not identify sign off by an independent reviewer.		
		All findings and recommendations were agreed with the Benefits Subsidy/Overpayments & ICT Manager and reported to the Head of Benefits Services, and the Acting Corporate Director of Resources.		

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Capital Programme and Accounting	July 2013	The main objectives of the audit were to provide assurance to management over the systems and controls for managing and monitoring the Capital Programme and Accounting and also to evaluate the potential consequences which could arise from any weaknesses in internal control procedures.  The main weaknesses identified were as follows:-	Extensive	Substantial
		<ul> <li>There was no evidence to confirm that capital receipts were monitored and reported to the Cabinet throughout the year to identify any potential delays in the timing or the amount of capital receipts; and</li> </ul>		
		<ul> <li>As part of the 2011/12 Audit, Management agreed to perform the reconciliation of the fixed asset register to the Corporate Asset and Property Management System (CAPS) on a quarterly basis. However, we found that the reconciliation of the fixed asset register to CAPS was performed only in quarter 2.</li> </ul>		
		All findings and recommendations were agreed with the Chief Accountant and reported to the Service Head – Financial Services, Risk & Accountability, and the Acting Corporate Director, Resources.		

### **Substantial Assurance**

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Management and Control of s.106 Planning Obligations	July	The objective of this audit was to provide assurance that the controls for managing Section 106 Planning Obligations were sound, secure and achieved the objectives of the Council. Following an audit review in 2008/09, a working party was set up to ensure that audit recommendations were implemented and the improvement in control environment was evident during the current audit.  The overall governance through the Planning Obligations Overview Panel (PCOP) had improved. Agendas were well planned and report formats were standardised and facilitated by the introduction of report templates. Management of complex projects was tackled by introducing the Major Projects Coordination Board [MPCB] which met bi-monthly, in time for Strategic Development Committee. PCOP was receptive to innovative ways of managing its portfolio and had enhanced working practices by accruing similar Heads of Terms together for bulk delivery rather than on an agreement–by-agreement basis where this was possible. Financial obligations due for	Extensive	Substantial
		collection were monitored by Finance maintaining a close liaison with the programmes manager and s106 officers.  However, we recommended that Terms of Reference for PCOP should be reviewed annually with clear quorum requirements. Any potential risks to officers needed to be clearly documented, communicated and mitigated to ensure officer independence. Key risks threatening effective management and delivery of S.106 agreements, needed to be formally captured and assessed. Improvement was required in the monitoring of non-financial obligations and also in ensuring that unallocated funds were programmed more effectively.  All findings and recommendations were agreed by the Service Head, Planning and Building Control and final report was issued to the Corporate Director – Development and Renewal.		

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Core Management	June 2013	The objective of this audit was to provide assurance that all recommendations agreed at the original audit had been implemented.	Extensive	Substantial
Follow Up audit		From our review, we could provide assurance that of the four Priority 2 recommendations we followed up, three had been progressed and one was in the process of implementation.		
		We understand that the launch of new Core HR policies did not take place in May 2012 as originally planned. The policies were expected to be launched in February 2013, followed by appropriate training and staff communication. Audit was later on advised by Talent Strategy Manager that the new Core HR policies were being consulted with the Trade Unions before being submitted to CMT for final approval.		
		All findings and recommendations were agreed with the Service Head, Human Resources and Workforce Development and final report was issued to the Acting Corporate Director, Resources.		

Title	Date of	Comments / Findings		of	Assurance
	Report		Service		Level
Performance Management	June 2013	This follow up audit assessed the progress made in implementing the recommendations agreed at the original audit.	Extensive		Substantial
Follow Up audit		There was one priority 2 recommendation we followed up, and on the basis of testing we carried out, we could provide assurance that this recommendation was fully implemented. We found that the preparation, approval and review of service and team plans was considered by the Performance Review Group at its meeting on 1 <sup>st</sup> March 2013. The PRG agreed that DMT / SMTs should take strong assurance role in ensuring that effective team plans are in place and monitored and to undertake peer reviews for 2013/14 team plans in October 2013.  Findings and recommendations were agreed with the Service Head, Corporate Strategy and Equality and final report was issued to the Assistant Chief Executive (Legal Services).			

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Data Quality	July 2013	The objective of this audit was to provide assurance that all recommendations agreed at the original audit had been implemented.	Extensive	Substantial
Follow Up audit		Our testing showed that out of four priority 2 recommendations made, all had been progressed. However, there were areas which needed to be tested further once the recommendations had been fully embedded. The robustness of evidence to support performance measures like the one on Homelessness needed to be closely monitored and scrutinised to ensure the integrity of data quality submitted by LBTH is preserved and that the reputation risk is managed properly.  We also found that a flow chart was developed, which directed the approval of definition change both in year and at year end. The Performance Review Group (PRG) actively monitored areas of weak performance and plans were in place to tackle areas of concern. Risk assessment had been carried out and weaknesses identified in 2012/13 sample checks were included in this risk assessment. As a result, the Homelessness measure was going to be reviewed again in 2013/14 and the PRG was fully updated with this issue.  All findings and recommendations were agreed with the Service Head, Corporate Strategy and Equality and final report was issued to the Assistant Chief Executive (Legal Services).		

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
THH Governance	July 2013	The objective of this audit was to provide assurance over the adequacy and soundness of the governance arrangements for Tower Hamlets Homes (THH).	Extensive	Substantial
Systems Audit		The first meeting of the newly constituted Board took place in December 2012. However, at the time of audit, the board was not fully complemented as two Council Board Members had yet to have their appointment confirmed by the Executive of the Council. A review of the Independent Board Members' Recruitment pack submitted to audit showed in broad terms, the role and responsibilities and undertakings for the Board Member(s). The recruitment pack also stated that Members would be offered training and advice. However, we were advised that Member's on-going training was an area which was being further progressed.		
	there was a requirement to record any potential conflicts of interest at Board meeting We were able to confirm that all Board Members completed a Declarations of Intereform. Members' Interests and guidance for Members was provided in a form of a noby the Chief Executive to the Board or Committee meetings. However, testing shower	Our testing showed that the Board could fully consider any conflicts of interest, as there was a requirement to record any potential conflicts of interest at Board meetings. We were able to confirm that all Board Members completed a Declarations of Interest form. Members' Interests and guidance for Members was provided in a form of a note by the Chief Executive to the Board or Committee meetings. However, testing showed that declarations of Members Interests were not covered at the meeting of Finance and Audit Committee on the 12 <sup>th</sup> December 2012 and for the 18 <sup>th</sup> March 2013.		
		All findings and recommendations were agreed with the Head of Communications and Governance and final report was issued to the THH Chief Executive.		

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Control and Management of Estate Parking Permits	June 2013	This audit was designed to assure management that the systems for controlling, monitoring and issuing of estate parking permits were sound, secure and adequate.  Our review found that there was a user friendly system for customers to locate	Extensive	Substantial
Systems Audit		vacant car spaces using the GIS parking system. Application forms could be downloaded and completed and sent electronically as well as sent by post. However, we highlighted the following control weaknesses:-  • Improved management checks and monitoring was required to ensure that		
		<ul> <li>procedures were complied with by staff before applications were approved and permits were issued.</li> <li>Security control over the stock of unused Estate Permits needed to be improved.</li> <li>Permit batch control numbers not being recorded.</li> </ul>		
		No system for recording spoils and cancellations.  All findings and recommendations were agreed with the Director of Finance and Customer Services and final report was issued to the THH Chief Executive.		

Title	Date of Report	Comments / Findings	Scale Service	of	Assurance Level
Supporting People	July 2013	The main objectives of the audit were to provide assurance to management over the systems and controls for managing and monitoring the Supporting People Programme to ensure that the programme achieves its key objectives and also to evaluate the potential consequences which could arise from any weaknesses in internal control procedures.	Extensi	ve	Substantial
		The main weaknesses identified were as follows:-			
		<ul> <li>We found that one out of the five services in our sample (Phoenix Court) had not had a monitoring visit within the last year. We understand that the implementation of annual visits to schemes is a relatively new introduction in the last financial year and, as a result, not all schemes have received a visit yet, but all visits are scheduled in and will be completed in the coming months. In addition, there is no evidence to confirm that findings from monitoring visits are discussed by senior management (i.e. Supporting People Steering Group).</li> <li>The Supporting People Commissioning Strategy stipulates that a detailed action plan, which sets out how the key objectives of the strategy will be delivered, should be developed and monitored by the Supporting People Steering Group on a quarterly basis. However, there is no evidence from our review of Supporting People Steering Group meeting minutes that this process is in place.</li> <li>Although service providers provide an activity report to the Council on a quarterly basis, we noted that there are a number of outcome targets included in the service specification at Phoenix Court which are not</li> </ul>			
		covered in the quarterly monitoring report currently provided by the contractor.			
		All findings and recommendations were agreed with the Commissioning Manager Supporting People and reported to the Service Head Commissioning and Health, and the Interim Corporate Director, Education, Social Care and Wellbeing.			

Title	Date of Report	Comments / Findings	Scale of Service	Assurance Level
Morpeth Secondary School	July 2013	The audit was designed to ensure that there were adequate and effective controls over the administration and financial management of the school. Our review confirmed that the school had a Full Governing Body and a Finance Committee which had overall responsibility for financial planning and control. The school followed good practice for the accounting of income and expenditure and generally had effective controls over the collection and recording of income received, and procurement. The school had adequate risk management and insurance arrangements in place.	Moderate	Substantial
		<ul> <li>All timesheets should be authorised in accordance with the Scheme of Delegation.</li> <li>Best practice guidance is that estimated financial commitments should be clearly outlined in the school's School Development Plan. Consideration should be given to making use of the latest version of the software to map objectives in the SDP to financial costs.</li> <li>All orders should be raised and authorised before they are placed with the supplier and not retrospectively after the school has received the invoice.</li> <li>The Terms of Reference should be updated to reflect that the Committee meetings should be held on a termly basis if required.</li> </ul>		
		All findings and recommendations were agreed with the Head Teacher and reported to the Chair of Governors and the Acting Corporate Director – Education, Social Care and Wellbeing.		

Title	Date of Report	Comments / Findings	Scale of Service		Assurance Level	
Old Church Nursery School	July 2013	The audit was designed to ensure that there were adequate and effective controls over the administration and financial management of the school. Our review confirmed that the school had a Full Governing Body and a Resources Committee which had overall responsibility for financial planning and control. The school followed good practice for the accounting of income and expenditure and generally had effective controls over the collection and recording of income received, and procurement. The school had adequate risk management and insurance arrangements in place.	Moderate	Substantial		
		The main recommendations were as follows:-				
		<ul> <li>The Scheme of Delegation and Financial Procedures should be reviewed and updated on an annual basis to help ensure that they reflect current working practices and align with the school's bank mandate. The revised Scheme of Delegation and Financial Procedures should be presented to the Governing Body for approval and minuting.</li> <li>Statutory policies including the Charging Policy, Pay Policy and Whistle Blowing Policy should be updated and presented to the Governing Body for review and minuting on an annual basis.</li> <li>The School Improvement Plan should be presented to the Governing Body for review, approval and minuting on an annual basis.</li> <li>Inventory records should be reviewed and updated on a regular basis. Once the annual inventory check has been completed a stock taking certificate should be produced and signed off by the person carrying out the check and signed off by the Head Teacher. The stock taking certificate should then be presented to the Governing Body for review and any discrepancies highlighted.</li> <li>All valuable and portable assets should be security marked in a permanent and visible manner. Marking should include the name and postcode of the school.</li> <li>Procedures and guidance should be developed for dealing with Freedom of Information requests and made available to relevant staff.</li> <li>All findings and recommendations were agreed with the Head Teacher and reported to the Chair of Governors and the Corpora Acting Corporate Director —</li> </ul>				

Title	Date of Report	Comments / Findings	Scale Service	of	Assurance Level
Columbia Market Nursery School		The audit was designed to ensure that there were adequate and effective controls over the administration and financial management of the school. Our review confirmed that the school had a Full Governing Body and a Finance, Personnel and Health and Safety Committee which have overall responsibility for financial planning and control. The school generally had good arrangements over the accounting for income and expenditure, payroll management and risk management and insurance arrangements in place.	Moderate	Substantial	
		The main recommendations were as follows:-			
	<ul> <li>All Governing Body meetings should be fully minuted. The minutes should provide an appropriate level of detail in respect of issues discussed, reports presented and decisions made, specifically highlighting ratification of policies or official documents.</li> <li>Official order forms should be raised and authorised for all purchases, where appropriate, and retained on file. Furthermore, the order forms should be raised prior to receipt of the invoice.</li> <li>The school should maintain an up to date copy of the bank mandate which matches the authorised signatories for the school's bank account.</li> </ul>				
		All official order forms and/or invoices should include the cost centre/budget code which the costs are associated with.			
		Minutes of the Curriculum Committee should be signed at the start of the next meeting by the Chair as an accurate record of the discussions of the previous meeting.			
		Evidence of budget monitoring review should be appropriately documented and retained to confirm review. The budget monitoring reports should be signed and dated by the preparing officer and the reviewing officer.			
		<ul> <li>A petty cash claim form should be fully completed and certified before any petty cash claim is reimbursed.</li> </ul>			
		All findings and recommendations were agreed with the Head Teacher and reported to the Chair of Governors and the Acting Corporate Director – Education, Social Care and Wellbeing.			

## **APPENDIX 3**

## Follow Up Audits – List of Priority 1 Recommendation still to be Implemented

Audit Subject	Recommendation	Service Head	Officer Name
Voids Management	The Head of Neighbourhood's should ensure that when housing officers record Notice received date on the SX3 System that this is the date when the tenant has actually signed the Termination of Tenancy Form V2, as this would be the only legal document to support the end of the tenancy agreement.	David Thompson	Molly Wallis, Interim Head of Service, Neighbourhoods.
Voids Management	The Head of Neighbourhood's should look at the possibility of having a tick sheet within each file that lists all of the MUST key documents that should be on file. This enables the housing officer to check and sign verification before the file is sent to the HUB. A copy of the tick sheet to be retained by the originating officer. Once the file has been scanned the HUB should send an email to the originating officer who will then check the scanned file on Comino to their copy tick sheet to verify that all key documents are now held electronically and acknowledge this with the HUB prior to the hard file being destroyed.	David Thompson	Molly Wallis, Interim Head of Service, Neighbourhoods.
Voids Management	The Neighbourhood housing manager should ensure that all void properties have gas and electricity safety inspections carried out. Copies of these Safety Certificates are to be held on Comino and Evidence that these checks have been undertaken	David Thompson	Molly Wallis, Interim Head of Service, Neighbourhoods.
Voids Management	The Neighbourhood housing manager should ensure that the key log for each void property is completed and scanned to the Comino system to ensure that a complete audit trail is preserved.	David Thompson	Molly Wallis, Interim Head of Service, Neighbourhoods.

# Follow Up Audits – List of Priority 2 Recommendation still to be Implemented

Audit Subject	Recommendation	Service Head	Officer Name
Voids Management	The Area Housing Manager should ensure that all potential voids have a pre inspection during the notice period and that this is recorded both on the SX3 and Comino system. Where it is identified that repairs are rechargeable then tenants should be invoiced for the repair.	David Thompson	Molly Wallis, Interim Head of Service, Neighbourhoods.