

Merton Council

Standards and General Purposes Committee Agenda

Membership

Councillors:

Martin Whelton (Chair)
John Oliver (Vice-Chair)
Laxmi Attawar
Sheri-Ann Bhim
John Braithwaite
Billy Hayes
Andrew Howard
Edith Macauley MBE
Robert Page
Marsie Skeete
James Williscroft
Victoria Wilson

Substitute Members:

Michael Butcher Samantha MacArthur Simon McGrath Michael Paterson

Date: Tuesday 5 March 2024

Time: 7.15 pm

Venue: Committee Room DE

This is a public meeting and attendance by the public is encouraged and welcomed. For more information about the agenda please contact democratic.services@merton.gov.uk or telephone 020.8545.3616.

All Press contacts: communications@merton.gov.uk, 020 8545 3181

Standards and General Purposes Committee Agenda

5 March 2024

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Note on declarations of interest

Members are advised to declare any Disclosable Pecuniary Interest in any matter to be considered at the meeting. If a pecuniary interest is declared they should withdraw from the meeting room during the whole of the consideration of that matter and must not participate in any vote on that matter. For further advice please speak with the Managing Director, South London Legal Partnership.

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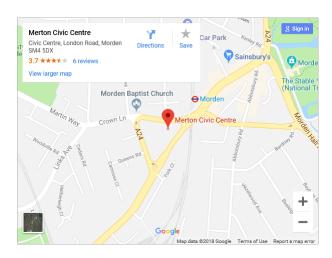
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Agenda Item 3

STANDARDS AND GENERAL PURPOSES COMMITTEE 9 NOVEMBER 2023

(7.15 pm - 9.15 pm)

PRESENT Councillors Councillor Martin Whelton (in the Chair),

Councillor John Oliver, Councillor Laxmi Attawar,

Councillor Sheri-Ann Bhim, Councillor John Braithwaite, Councillor Caroline Charles, Councillor Billy Hayes, Councillor Andrew Howard, Councillor Edith Macauley, Councillor Robert Page and Councillor Victoria Wilson

PRESENT ONLINE

Councillor Victoria Wilson, Katy Willison (Independent Person)

ALSO ATTENDING John Scarborough (Monitoring Officer), Ruth Hammick (Complaints Manager), Margaret Culleton (Internal Audit Manager), Kevin Holland, Elizabeth Jackson (External Audit, EY), Richard Seedhouse (Democratic Services Officer)

ALSO ATTENDING ONLINE Zoe Church (Head of Business Planning), Nemashe Sivayogan

(Treasury and Pensions Manager)

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Apologies were received from Clive Douglas (Independent Person). Cllr Wilson attended online.

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of interest.

3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

RESOLVED: That the minutes were agreed, subject to an amendment to note that the HR Update, the simpler report will be reviewed by both the chair and vice-chair before it comes back to Committee.

4 ANNUAL GIFTS AND HOSPITALITY REPORT (MEMBERS) (Agenda Item 4)

The Monitoring Officer introduced the report, noting that the items reported were as expected for a council of this size/nature.

In response to questions and comments, the Monitoring Officer confirmed that:

 'signficant' is a subjective term, and all members are encouraged to seek advice on a case by case basis if they have questions/concerns - Not everything in the register is published on the council website or in the digest attached to the report, but it is available to be inspected if requested.

It was RESOLVED that

- the Committee noted the report.
- Members were reminded of their responsibility to complete declarations of gifts and hospitality including reasons for acceptance within 28 days of receipt.

5 ANNUAL GIFTS AND HOSPITALITY REPORT (OFFICERS) (Agenda Item 5)

The report was introduced by the Monitoring Officer, highlighting that the inspection of the registers showed that departmental registers continue to be maintained, and the number of entries was low.

In response to questions, the Monitoring Officer confirmed that:

- The 100 tickets were used by officers following the passing of Her Majesty Queen Elizabeth II
- Officers were advised to run invitations/hospitality from AELTC by managers before accepting
- Officers are not named, this would not be appropriate, but an indication of grade is provided
- The wording can be considered next time the relevant section is reviewed.

6 REVIEW OF POLLING DISTRICTS AND POLLING PLACES (Agenda Item 6)

The Head of Electoral Services introduced the report, noting that the last statutory review was in 2019, a full review for Merton was completed in 2021 due to the Boundary Comission review of ward boundaries. We were still required to complete this review and chose to complete as soon as possible given the electoral programme for 2024.

The online consultation began in October, local MPs, agents for political parties and members of the council have been contacted, along with Merton Independent Living and others to assess disabled access.

To avoid confusion, alterations have only been made where necessary.

- Lower Malden and St Helier, now at St Margaret's Church as previous venue being renovated
- Some movement from Raynes Park Library to Dundonald Church
- Minor change in Ravensbury, use of Gifford House lobby instead of a portacabin
- A marquee will be placed outside the Pavilion in Lavender Fields

In response to questions, the Head of Electoral Services confirmed that:

- Electoral Commission guidance is for 2250 voters per single polling station,
- Size of polling stations is also affected by expected turnout, GLA is at around 40%, but a general election is nearer 70%
- The marquee in Lavender Fields will be outside the front of the building
- There are around 25,000 postal voters in Merton, approximately 11,000 in Mitcham and Morden and the rest in Wimbledon
- A recent repot on the introduction of Voter ID has gone to LSG, there will be a working group to engage departments with more reach into communities, along with direct mailing and leafletting through canvass. Another leaflet will go in January, information is also on polling cards and there will be an email shot to everyone for whom we hold an email address. Communications Team have a campaign running on Twitter, the council website and on billboards throughout the borough.
- We will be in touch with Clarion about use of space in community rooms, but it can't be guaranteed at this time.
- The marquees do have floorboards, so there shouldn't be an issue with excessive mud in inclement weather.
- There is a new style polling booth with greater privacy if there is a queue.
- There is interest on our side in moving the Wimbledon and Dundonald polling station across Kingston Road, however the property owners have not shown much interest.
- 7 schools are used, only 4 need to close on polling day. Historically 20 schools were used, we are always on the look out for new potential stations and avoid schools as much as possible
- If marquees or portacabins are sited in school carparks, there is nowhere for the staff to park, and they cost a lot of money and are difficult to source, don't always meet accessibility requirements and incur extra costs for security and electricity generators.
- Headteachers have the final say on opening/closing school on polling day

7 22/23 ANNUAL COMPLAINTS REPORT (Agenda Item 7)

The Complaints Manager introduced the report.

In response to questions it was confirmed that:

- The level of complaints is not particularly high in relation to the number of service users, we expect levels to be at around 1-2%
- The Ombudsman advises that authorities should not fear the number of complaints as it can also be an indicator of accessibility
- Some of the complaints about council tax are linked to where the incorrect charge has been applied, for instance when a property is unoccupied, others have focused on how we collect monies due.
- If a complaint is upheld we have to review the service before further progress can be made
- Complaints team can only advise managers, it is managers' responsibility to instill learning and changes in their teams.

- There is ongoing work to improve complaint handling, to meet the targets we have set, staff can often fear complaints, and that is something we need to overcome, complaints are often not personal, they are about processes and practices.
- Weekly reports are provided to Directors and Executive Directors, to keep them abreast of new and in-progress complaints.

It was RESOLVED that the committee would receive a report on root cause analysis on Corporate and ASC complaints that considered any system or process changes to manage those complaints at the June meeting.

8 EXTERNAL AUDIT OF LONDON BOROUGH OF MERTON 22/23 (Agenda Item 8)

The External Auditor presented the report, highlighting that we are waiting for DLUHC to give guidance on the audit market and what's happening for 22/23 and how to move to 23/24 to get back on a regular time frame. Merton is in a good place with a statement of accounts published, but audit has not begun, it's a complex situation.

Value For Money work, sustainability and governance and economy efficacy and effectivenesss are continuing, but we are not currently looking at accounts, the deadline is September or November 2024.

DLUHC Minister is still considering options instead of auditing, such as unqualified reports or limitation of scope reports. These would not be the fault of the council.

Value for Money work would allow a public report which would put the Merton accounts on record.

The DLUHC announcement is expected before Christmas with the aim to then have work signed off by the end of March.

In response to questions the committee was informed that:

- The organisation has a solid base to move forward from, Internal Audit also has a role in ensuring good processes
- EY did not want to start work until they know that they will be paid for the work undertaken, it can take a year to audit accounts, and did not want to invest six months of work to then be directed to move to disclaimers anyway
- While there is a deadline to submit accounts, there is not one for completing an audit
- The pension audit is going ahead.

It was RESOLVED that the Committee noted the report.

9 MERTON PENSION FUND EXTERNAL AUDIT PLAN 22/23 (Agenda Item 9)

The report was introduced to the Committee and in response to questions were informed that:

- The audit had begun and would run until Christmas, the report set out the risks, there were three listed with a fourth to be added
- No indication that there was fraud within the fund, enhanced procedures are used to check this.
- we don't do Value for Money checks on pensions, but would do if there was a sudden spike or change in the custodian or investment manager.

It was RESOLVED that the Committee noted the report.

10 INTERNAL AUDIT PROGRESS REPORT (Agenda Item 10)

The Internal Audit Manager introduced the report and in response to questions further informed the Committee that:

- Audit of issuing grants was on the plan, for guarter 4
- We have 47 schools in Merton, and try to audit 8 schools per year, there are two members of staff who regular visit and support schools and raise concerns where necessary, and factor these concerns into risk assessments.
- Schools are not immune to the financial situations we're all in, We have seen a significant rise in deficits, the volume has gone up nationally. The report highlights some procedural issues which are being rectified. 3 year deficit recovery plans are in place where needed.
- There is no arrangement with Central Government, nothing has been said centrally about deficits and we are waiting for a further review of school funding by the government in due course.
- The most significant expenditure in schools is staffing, we don't dictate to schools on how they should be set up, but the three year plan is key to finding a solution to seek to reduce costs.
- The council has a role to play in sharing knowledge on how other schools are approaching similar problems
- There is a risk that the Council could have to fund a deficit, schools are required to submit budget reports to show how they are managing, and the council provides oversight. There are sanctions we can take as an authority, but these are rarely exercised.

It was RESOLVED that the Committee noted the report and commended the Internal Audit Manager for the work undertaken.

11 FRAUD UPDATE REPORT (Agenda Item 11)

The report was introduced to the Commiteee, there were no questions.

It was RESOLVED that the Committee noted the report and that it showed the council was doing all it can.

It was also RESOLVED that the Committee reviewd the Anti-Fraud and Anti-Corruption Strategy and agreed the amendments.

12 PROGRESS REPORT ON RISK MANAGEMENT (Agenda Item 12)

The report was introduced by the Head of Business Planning, who noted in particular that there were 10 items on the register, 7 that might happen and 3 issues that are actually happening. 4 items are of particular concern.

In response to questions, the committee was informed that:

- There are different methodologies in how to present risk, and the team will review this before the report is next presented to the committee
- The control actions should indicate what we think needs to be done to mitigate risks, there is not a significant area of risk with no controls in place.

13 WORK PROGRAMME (Agenda Item 13)

It was RESOLVED that the Committee agreed the work programme, noting that it was disappointing that the External Audit problems will ripple forwards.

Committee: Standards & General Purposes Committee

Date: 5 March 2024

Wards: All

Subject: Regulation of Investigatory Powers Act 2000 &

Investigatory Powers Act 2016

Update on Authorisations and Approval of

revised RIPA Policy

Lead officer: John Scarborough, Monitoring Officer

Lead member: Councillor Martin Whelton

Contact officer: John.Scarborough@merton.gov.uk

Recommendations:

A. That Members note that no investigations have involved authorisations under the Regulation of Investigatory Powers Act 2000 (RIPA) since the last report.

B. That members review and approve the revised RIPA Policy.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1 To update Members about authorisations since 10 March 2022 and to seek approval of the revised RIPA Policy.

2 DETAILS

- 2.1. The council has a number of statutory functions that involve officers investigating the conduct of others with a view to bringing legal action against them. These functions include investigating anti-social behaviour, fly tipping, noise nuisance control, blue badge enforcement, planning enforcement, fraud, contraventions of trading standards, licensing and food safety legislation.
- 2.2. Whilst the majority of investigations can effectively be carried out openly, some investigations require the use of covert surveillance techniques or involve the acquisition of communications data in order to secure evidence of unlawful activity to enable enforcement action to be taken, where appropriate. Communications data is information about the times of calls or internet use and the location and identity of the users, but not the content of the calls or details of the websites viewed.
- 2.3. RIPA regulates the authorisation and monitoring of these investigations to safeguard the public from unwarranted intrusion of privacy.
- 2.4. Since 1 November 2012, when the provisions of the Protection of Freedoms Act 2012 came into force, amending the Regulation of Investigatory Powers Act 2000 (RIPA), local authorities have been required to obtain the judicial approval from a magistrate for the use of covert surveillance.

- 2.5. In line with the revised Code of Practice, reports detailing the use of RIPA are submitted to the Committee on a regular basis.
- 2.6. Since 10 March 2022 no authorisations for directed surveillance have been made for the purposes of preventing or detecting crime.
- 2.7. Since 10 March 2022 no authorisations have been made for the use of CCTV footage for RIPA investigations.
- 2.8. Accordingly, no RIPA authorisations have been resubmitted to the Magistrates Court gor judicial approval.
- 2.9. Since 10 March 2022 no applications have been made for the acquisition of communications data.

3 APPROVAL OF RIPA POLICY

- 3.1 The council's RIPA Policy was last revised and put to the Committee for approval on 23 July 2020. The Policy will in future be subject to annual review and submitted to the Committee for approval.
- 3.2 The RIPA Policy (see Appendix) has been revised in format and style for ease of presentation and clarity, but the only substantive amendments relate to changes introduced by Sections 37 to 44 of the Police, Crime, Sentencing and Courts Act 2022..
- 3.3 The Committee is asked to review and approve the Revised Policy.

4 ALTERNATIVE OPTIONS

4.1. The report is for information only.

5 CONSULTATION UNDERTAKEN OR PROPOSED

5.1. No consultation has been undertaken regarding this report.

6 TIMETABLE

6.1. N/A.

7 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

7.1. None.

8 LEGAL AND STATUTORY IMPLICATIONS

- 8.1 RIPA was introduced to ensure that covert surveillance undertaken by public authorities is undertaken in accordance with the European Convention on Human Rights and the Human Rights Act 1998. The RIPA framework establishes a lawful process to use covert surveillance and thereby protects the Council from legal claims, providing it has been complied with.
- 9 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 9.1. RIPA was introduced to regulate existing surveillance and investigations in order that they meet the requirements of Article 8 of the Human Rights Act. Article 8 states:
 - (1) Everyone has the right for his private and family life, his home and his correspondence.
 - (2) There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others.
- 9.2 Under section 149 of the Equality Act 2010, the council has a duty when exercising its functions to have 'due regard' to the need to eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act and advance equality of opportunity and foster good relations between persons who share a protected characteristic and persons who do not. This is the public sector equality duty.
- 9.3 The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- 9.4 Due regard is the regard that is appropriate in all the circumstances.
- 9.5 There are no equalities implications arising from this report.

10 CRIME AND DISORDER IMPLICATIONS

- 10.1. RIPA investigations are authorised for the prevention or detection of crime or the prevention of disorder.
- 11 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS
- 11.1. None.
- 12 APPENDICES THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT
- 12.1. RIPA Policy.
- 13 BACKGROUND PAPERS
- 13.1. None.



London Borough of Merton Policy and Procedure

Regulation of Investigatory Powers 2000

London Borough of Merton Policy date: 26/02/2024

MERTON COUNCIL'S RIPA POLICY AND PROCEDURES

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- 1. Introduction
- 2. Definition of Surveillance
- Covert Surveillance
- 4. Types of Covert Surveillance
- 5. Basis for Lawful Surveillance Activity
- 6. Directed Surveillance example and a Note on Aerial Surveillance.
- 7. Communications Data
- 8. Covert Human Intelligence Sources (CHIS)
- Becoming a CHIS and 'status drift'
- 10. Requirement to obtain a URN from SLLP (Information Governance Team)
- 11. Role of Authorising Officers (AOs) and the special role of the Chief Executive
- 12. The Two Mandatory Tests for Directed Surveillance and CHIS
- 13. Proportionality striking the balance
- 14. Judicial Approval
- 15. Forms to be used
- 16. Other useful definitions & guidance
 - a) RIPA for Merton Council CCTV
 - b) Confidential information
 - c) Duration of Authorisation
 - d) Reviews
 - e) Renewals
 - f) Cancellation
- 17. Central Record of Authorisations and Record Keeping
- 18. Senior Responsible Officer (SRO)
- 19. RIPA Reviews/Reports
- 20. The use of the internet and social media for investigative purposes
- 21. Training & Monitoring
- 22. Investigatory Powers Commissioner's Office (IPCO)
- 23. Collaboration with other authorities/agencies
- 24. Codes of Practice
- 25. Data Protection Act 2018
- 26. Consequences of non-compliance
- 27. Case to note: Gary Davies v British Transport Police.

APPENDICES

- 1. Senior Responsible Officer (SRO) Contact Details
- 2. List of Authorising Officers & Contact Details
- 3. Prosecution Lawyers
- 4. Communications Data Senior Designated Officer
- 5. Annex B: Judicial application/order form
- 6. Arrangements for Non-RIPA activity

1. Introduction

- 1.1 This policy explains the Council's use and conduct of covert surveillance techniques when investigating serious criminal offences relying on the powers made available to local authorities in Part II of the Regulation of Investigatory Powers Act 2000 (RIPA) and the Investigatory Powers Act (IPA) 2016.
- 1.2 RIPA authorises surveillance in accordance with the statutory framework making it lawful; and thereby protecting the Council from legal claims, complaints and ensuring that the evidence relied upon in prosecutions is admissible.
- 1.3 Covert surveillance techniques include:
 - a. static surveillance (for example, taking up an observer post to monitor the activities and movements of those suspected of having committed criminal offences);
 - b. mobile surveillance (for example, following someone to see where they are going without their knowledge);
 - c. using hidden CCTV at a crime hotspot and the use of undercover officers and informants; monitoring a person's activities on the internet or social media.
- 1.4 This policy also contains some information about accessing communications data such as out-going phone calls and websites visited held by telephone and internet service providers. However, only information about who sent the communication, for example, when and how can be accessed but not the content, that is, what was said and written.
- 1.5 As well as the current legislation, the Council's policies and procedures are informed by statutory Codes of Practice issued regularly by the Home Office, most recently in 2018 (namely, the Covert Surveillance etc. Revised Code of Practice and Covert Human Intelligence Sources Revised Code of Practice).
- 1.6 The Council's use and conduct of covert surveillance techniques is overseen internally by the Council's Monitoring Officer, who also acts as the Council's Senior Responsible Officer (SRO) for the purposes of the Home Office Codes of Practice, and externally by the Investigatory Powers Commissioner's Office. The IPCO conducts periodic inspections of public authorities entitled to exercise RIPA powers in order to fulfil their oversight role.
- 1.7 The Council's policies and procedures have been approved by the Standards and General Purposes Committee which has an oversight role and carries out high-level annual reviews of any authorisations granted or renewed, initially by an Authorising Officer of the Council and subsequently by a magistrate, in accordance with the requirements of RIPA.
- 1.8 Compliance with the policies and procedures agreed in this document is mandatory for all relevant Council services and officers. RIPA powers are most

likely to be used to enforce trading standards controls and tackling fly-tipping and repeatedly fraudulent use of blue badges. It remains essential, however, that all potential users are fully aware of the contents of this document.

1.9 Where applicable and potentially helpful, relevant statutory provisions are referred to, to assist you in the application of the policies and procedures.

2. Definition of Surveillance

- 2.1 Surveillance for the purpose of RIPA includes "monitoring, observing or listening to persons, their movements, conversations or other activities and communications". It may be conducted with (or without) the assistance of a surveillance device, and includes the recording of any information obtained. Surveillance can be undertaken whilst on foot, mobile or static.
- 2.2 This policy only relates to surveillance which is necessary on the grounds specified in the 2000 Act (specified at S28 (3)) for directed surveillance. Covert surveillance for any other general purpose should be conducted under other legislation, if relevant, and an authorisation under this policy should not be sought.

3. <u>Covert Surveillance</u>

- 3.1 Surveillance is covert <u>if and only if</u>, it is carried out in a manner that is calculated to ensure that persons who are subject to the surveillance are unaware that it is (or may be) taking place [Section 26(9) (a)].
- 3.2 It must be likely to result in the obtaining of "private information" about the person observed. "Private Information" covers any aspect of a person's private or family life, including their family, professional and business relationships. It covers personal data like names, addresses and telephone numbers [Section 26 (10)], which are also covered by the Data Protection Act 2018 and the General Data Protection Regulation (GDPR).
- 3.3 Obtaining private information may happen in a public place where the person has a reasonable expectation of privacy whilst there, especially where:
 - a) the public authority concerned records the information gained, or
 - b) several records are to be analysed together to show a pattern of behaviour.
- 3.4 Surveillance of publicly accessible areas of the internet should be treated in a similar way, recognising that there may be an expectation of privacy over information that is on the internet, particularly when accessing information on social media websites.

4. Types of Covert Surveillance

4.1 Covert surveillance may be "Intrusive" or "Directed".

Intrusive Surveillance

- 4.2 Local Authorities are <u>NOT</u> permitted to conduct Intrusive Surveillance at all. Intrusive surveillance is covert surveillance that:
 - a) covers anything taking place on/in any residential premises or a private vehicle.
 - b) involving either a person on the premises/or in the vehicle, or
 - c) is carried out by a surveillance device, (even if a device is not on the premises or in the vehicle if it provides information of the same quality and detail as if it was inside, this may amount to Intrusive Surveillance.

Surveillance of premises used for the purpose of legal consultations is also regarded as Intrusive Surveillance.

Directed Surveillance

- 4.3 Directed Surveillance must be:
 - a) for the purpose of a <u>specific operation</u> or investigation (relating to a statutory Enforcement function);
 - b) covert. Its <u>target</u> must be <u>unaware</u> that it is or could be taking place;
 - c) done in a way that is likely to obtain private information about the target;
 - d) planned. It must <u>not</u> be an <u>immediate response</u> to events.
- 4.4 Under the provisions of RIPA 2000, Local Authorities can now ONLY conduct Directed Surveillance for the prevention or detection of crime. There is a minimum crime threshold so that offences must be punishable (whether on indictment or summary conviction) by a term of at least 6 months imprisonment, or be related to the underage sale/supply of alcohol or tobacco/nicotine.
- 4.5 Note the minimum crime threshold does <u>not</u> apply to the use of a Covert Human Intelligence Source (CHIS).

5. Basis for Lawful Surveillance Activity

- 5.1 The Human Rights Act 1998 (HRA) gave effect in UK law, to the rights of individuals enshrined in the European Convention on Human Rights 1950 [ECHR]. Some of the rights are absolute, whilst others are qualified, meaning that it is permissible for the state to interfere with those rights provided certain conditions are satisfied. One of the qualified rights is the Right to respect for one's private and family life, home and correspondence [Article 8 ECHR].
- 5.2 In limited circumstances Local Authorities are permitted to conduct covert surveillance, namely Directed Surveillance, and to use Covert Human

- Intelligence Sources [CHIS], both of which would result in the subject's Article 8 Rights being infringed or interfered with by a public authority.
- 5.3 RIPA Part II (as amended by Regulations and the Protection of Freedoms Act 2012) provides the statutory framework to enable covert surveillance to be lawfully authorised and conducted. This is to ensure it is does not infringe the Article 8 rights, except as may be permitted by Article 8 (2), and to ensure the Council as a public authority is acting in a way which is compatible with the ECHR, as required by HRA section 6.
- 5.4 Since RIPA 2000 was passed, and particularly since 2010, Local Authorities' powers have been increasingly curtailed. For example, the additional purposes of protection of public health, or in the interests of public safety, and the prevention of public disorder have all been removed.
- 5.5 To be sure a matter is RIPA controlled, officers must identify from the outset whether:
 - a) they are investigating a criminal offence and if so,
 - b) whether it passes the minimum crime threshold.
- 5.6 From 1/10/2015 the 2010 Regulations were amended further to add that the potential offences may relate to the purchase of alcohol <u>on behalf</u> of those under 18 (proxy purchases), or the sale of <u>nicotine products</u> to those under 18.
- 5.7 If an officer is unsure what specific criminal offences are being investigated, or the penalties for them, legal advice should be taken from the Senior Enforcement Lawyer (see Appendix 3) who will identify any criminal offences arising out of the facts of the investigation at that stage. If no offence is identified, Directed Surveillance under RIPA will not be permitted.
- 5.8 Before proceeding with an application for the authorisation of Directed Surveillance, an applicant officer must also consider whether the proposed action is proportionate (as well as necessary) to prevent or detect crime. Proportionality (discussed in paragraph 13 below), also applies to any proposal to use a CHIS.
- 5.9 Directed Surveillance cannot be used by Local Authorities to investigate low-level offences such as littering, dog fouling and fly posting. However, there may be cases where the offence causing concern fails to pass the minimum RIPA crime threshold, but officers wish to take action to carry out their duties and protect local residents from harm to their social, economic or environmental well-being.
- 5.10 To avoid exposing the Council to the risk of reputational harm, damages or costs, officers should seek advice as to whether it may be possible to satisfy the requirements of ECHR Article 8 (2) by alternative means.
- 5.11 The effect of RIPA section 80 is to make authorised surveillance lawful, but it does not make unauthorised surveillance unlawful. The Council retains the right to exercise discretion, if presented with facts that justify an alternative view or approach, where a case lies outside the ambit of the RIPA regime and controls.

5.12 In such cases, where the crime threshold is not met, the Council will work in line with its policy and procedures on non-RIPA surveillance, and keep written logs of activity open to scrutiny by the SRO and IPCO. Further information appears in Appendix 6.

6. Directed Surveillance Example

- 6.1 An example of Directed Surveillance is a covert static post (for example, an officer in car outside an address with a camera) taking pictures of, and/or following a target who has claimed Direct Payment, on the basis that they are severely disabled to the extent that they cannot walk unaided nor drive. The Directed Surveillance is undertaken as it is alleged that the disabilities are invented and/or exaggerated by the target.
- 6.2 The surveillance scenario would be covert, as it is being used for a specific investigation and conducted in a manner likely to result in the obtaining of private information about a person (namely their movements/mobility in and around their home address and their daily activities), by video and/or photographic evidence. This operation is a clear example of Directed Surveillance.

6.3 Aerial Covert Surveillance

Where surveillance using airborne crafts or devices, for example helicopters or unmanned aircraft (known as 'drones'), is planned, consideration should be given as to whether an aerial surveillance authorisation is appropriate.

7. Communications Data

- 7.1 As part of an investigation, there are occasions when "Communications Data" (CD) is permitted to be obtained from a Communications Service Provider ("CSP").
- 7.2 Communications Data includes the 'who', 'when', 'where', and 'how' of a communication, but Local Authorities are prohibited from obtaining the content of any communication, that is, what was said or written. CD includes the way in which, and by what method, a person or thing communicates with another thing or person. It excludes anything within a communication including text, audio and video that reveals the meaning of the communication. CD is generated, held or obtained in the provision, delivery and maintenance of communications services, that is, postal services or telecommunications services.

All communications data held by a telecommunications operator or obtainable from a telecommunication system falls into two categories of entity data and events data; and Local Authorities may only acquire less intrusive types of Communications Data:

(a) "Entity data" (for example, subscriber information such as the identity of the person to whom services are provided, address and customer information); includes:

- 'subscriber checks' such as "who is the subscriber of phone number 020 7224 3688", "who is the account holder of e-mail account sherlock.holmes@Bakerstreet.co.uk?" or "who is entitled to post to web space www.example.co.uk?":
- subscribers' or account holders' account information, including names and addresses for installation, and billing including payment method(s), details of payments;
- information about the connection, disconnection and reconnection of services to which the subscriber or account holder is allocated or has subscribed (or may have subscribed) including conference calling, call messaging, call waiting and call barring telecommunications services: or
- (ii) "Events data" (for example, the date and time sent, duration, frequency of communications, call diversion and IP address information) includes, but is not limited to:
 - information tracing the origin or destination of a communication that is, or has been, in transmission (including incoming call records);
 - information identifying the location of apparatus when a communication is, has been or may be made or received (such as the location of a mobile phone);
 - itemised telephone call records (numbers called);
 - itemised timing and duration of service usage (calls and/or connections)
- Part 3 of the Investigatory Powers Act 2016 (IPA) contains the provisions 7.3 that govern the powers available to the Local Authorities for the lawful acquisition of CD.
- 7.4 Judicial approval is a required before undertaking directed surveillance or use of a CHIS. The Office for Communications Data Authorisations (OCDA) makes independent decisions on whether to grant or refuse communications data requests, ensuring that all requests are lawful, necessary and proportionate.
- 7.5 The Data Retention and Acquisition Regulations 2018 (SI 2018/1123) ("DRAR") amend Parts 3 and 4 of the IPA, which provides for the retention of Communications data by telecommunications and postal operators, and the acquisition of that communications data by public authorities.
- 7.6 The DRAR introduced the new code of practice entitled "Communications Data" Code of Practice" about the exercise of functions conferred by Parts 3 and 4 of the IPA (Regulation 2).
- 7.7 As a matter of policy and practice, the Council must now submit all their Communications Data applications to NAFN (National Anti-Fraud Network), for the consideration of the OCDA. This means that NAFN will be the Single Point of Contact ("SPoC) for all applications made by Merton Council.

- 7.8 However, before submission to NAFN, the application must be brought to the attention of the Designated Senior Officer who has been given the designated role of overseeing the applications before submission to NAFN. The details of the Designated Senior Officer appears in Appendix 4.
- 7.9 The Regulatory Services Partnership (hosted by Merton Council provided the statutory regulatory functions for the three London Boroughs of Merton, Richmond upon Thames and Wandsworth) collaborates and liaises with NAFN to ensure the provisions of the IPA are complied with and to ensure any application follows best practice.
- 7.10 In order for Merton to request CD under the IPA it must be necessary for the applicable crime purpose; and, the "applicable crime purpose" must be met concerning all applications for both *Entity Data* and *Events Data*.
- 7.11 The applicable crime purpose is defined differently depending on the data type. Where the Communications Data sought is *Entity Data*, the applicable crime purpose is the prevention or detection of crime or the prevention of disorder.
- 7.12 In cases where the Communications Data required is wholly or partly *Events Data*, the applicable crime purpose is defined as preventing or detecting serious crime (the "serious crime threshold"). The *serious crime threshold* under IPA includes:
 - offences where an adult may be sentenced to at least 12 months or more in prison
 - any offence involving violence, resulting in a substantial financial gain or involving conduct by a large group of persons in pursuit of a common goal;
 - any offence committed by a body corporate;
 - any offence which involves, as an integral part of it, the sending of a communication:
 - any offence which involves, as an integral part of it, a breach of a person's privacy.
 - An application for CD should also consider factors relating to proportionality as follows [3.16 of the Code]:
 - whether what is sought to be achieved could reasonably be achieved by other less intrusive means,
 - whether the level of protection to be applied in relation to obtaijning communications data is higher because of the particular sensitivity of that information, and
 - the public interest in the integrity and security of telecommunication systems and postal services.
- 7.13 A CD authorisation becomes valid on the date the authorisation is granted. It is then valid for a maximum of one month.
- 7.14 The Designated Senior Officer maintains a separate electronic register from the Council's Centrally Retrievable Records, which is subject to inspection and procedures in the Communications Data Code of Practice and related legislation.

- 7.15 Any staff considering the use of communications interception or other activity should contact the Designated Senior Officer to discuss the proposed action in order to obtain appropriate direction and guidance.
- 8. Covert Human Intelligence Sources [CHIS]
- 8.1 A CHIS is perhaps more commonly called an "informant". A person is a CHIS if they:-
 - (a) establishes or maintains a personal or other relationship with a person for the covert purpose of facilitating the doing of anything falling within paras (b) or (c);
 - (b) covertly uses such a relationship to obtain information or provide access to any information to another person; or
 - (c) covertly discloses information obtained by the use of such a relationship, or as a consequence of the existence of such a relationship.
- 8.2 The key difference between Directed Surveillance and use of CHIS is that the first involves the obtaining of private information through covert means, whereas the second involves the manipulation of a relationship to obtain information. Any manipulation of a relationship amounts to a fundamental breach of trust, which depending on the covert purpose can place a CHIS in serious danger. Consequently, extra precautions may be required to ensure a CHIS is not discovered.
- 8.3 In order to grant an authorisation for using a CHIS, the Authorised Officer ("AO"), and subsequently a Magistrate, must believe that in addition to the operation being necessary, and proportionate, that:
 - "arrangements exist for the source's case that satisfy the requirements of subsection (5) and such other requirements as may be imposed by order of the Secretary of State," [RIPA 2000, S29(2)(c)(iii)].
- 8.4 "Control" of a CHIS. Subsection (5) requires that arrangements are in place in respect of the CHIS for ensuring that:
 - (a) that there will be at all times a "handler" of the specified rank with the relevant investigating authority, with day to day responsibility for the source.
 - (b) that there will be at all times a "controller" of the specified rank with the relevant investigating authority with the general oversight of the use made of the source.
 - (c) that there will at all times be a person of the specified rank with the relevant investigating authority who will have responsibility for maintaining a record of the use made of the source:
 - (d) that the records relating to the source that are maintained by the relevant investigating authority will always contain particulars of all such

- matters (if any) as may be specified for the purposes of this paragraph in regulations made by the Secretary of State
- (e) that the records maintained that disclose the identity of the source will <u>not</u> be available to persons except to the extent that there is a need for access to them to be made available to those persons.

"Relevant investigating authority," means the public authority <u>for whose benefit</u> the activities of that individual as such a source are to be undertaken. (**Note**: The Council may undertake joint operations.)

- 9. Becoming a CHIS and 'status drift'
- 9.1 A CHIS may be a member of the public or an officer acting with authority to do so. Common uses of CHIS are the infiltration of a gang, for example, football gangs or an undercover police officer being recruited into a drugs operation/conspiracy.
- 9.2 Please note that there may be circumstances where a less obvious CHIS exists. Care must be taken to identify that this person is a CHIS, and thereafter follow the correct procedure. An example is a case where a member of the public has given information, albeit not tasked to do anything with it. Such a person may be a CHIS if the information that they have covertly passed to Merton has been obtained in the course of (or as a consequence of he existence of) a personal or other relationship.
- 9.3 Although not specifically recruited to be a CHIS, such a person <u>may become</u> one. This situation known as the risk of "status drift." Therefore, when an informant gives repeat information about a suspect or about a family, and it becomes apparent that the informant may be obtaining that information in the course of a family or neighbourhood relationship, it is a strong indication that the informant is in reality a CHIS to whom a duty of care is owed if the information is then used.
 - <u>Legal advice</u> must always be taken before using or acting on information received in these circumstances.
- 9.4 Becoming a CHIS gives rise to a duty of care owed to that person by the Council who seeks to benefit from their activity, as set out in paragraphs 8.2 and 8.3 above.
- 9.5 RSP regularly undertake covert test purchasing, and task children to request a one-off sale. The Council takes the view that such conduct does <u>not</u> constitute a CHIS, as the child does not form any relationship with the target in a one-off sale. However, you must consider whether covert test purchasing requires a Directed Surveillance authorisation.

- 9.6 Please note <u>all authorisations for a juvenile CHIS or where confidential</u> information may be obtained MUST be approved by the Chief Executive as Head of Paid Service. The Council must ensure that an appropriate adult is present at any meetings with a CHIS under 16 years of age. The appropriate adult should normally be the parent or guardian of the CHIS.
- 9.7 RSP operate policy and procedures based on guidance from the Trading Standards national body in such circumstances.
- 9.8 The use and wearing of recording devices is done in accordance with the College of Policing Body Worn Video Guidance 2014. Following the case of AB v Hampshire Constabulary IPT/17.191/CH (5.2.19) it should be noted the video recording body worn camera is capable of amounting to surveillance within the meaning of Part 11 RIPA 2000.
- 9.9 It may be necessary to deploy covert surveillance against a potential or authorised CHIS, other than those acting in the capacity of an undercover operative, as part of the process of assessing their suitability for recruitment, deployment or in planning how best to make the approach to them. Covert surveillance in such circumstances may or may not be necessary on one of the statutory grounds on which directed surveillance authorisations can be granted, depending on the facts of the case. Whether or not a directed surveillance authorisation is available, any such surveillance must be justifiable under Article 8(2) of the ECHR.
- 10. Requirement to obtain a Unique Reference Number from SLLP (Information Governance Team)
- 10.1 For Directed Surveillance that satisfies the Crime Threshold Test or for a CHIS, the officer must first obtain a Unique Reference Number [URN] for the operation from an Information Governance Officer, prior to the completion and/or submission of an application for Directed Surveillance and/or CHIS to an Authorising Officer (AO).
- 10.2 In view of current requirements, the applicant/officer must now answer the following six questions within the RIPA Request Form:
 - a) is DS/CHIS for the Prevention or Detection of Crime?
 - b) specify the criminal offence(s) being investigated and the statute(s)
 - c) for Directed Surveillance only, does the criminal offence(s) meet the Crime Threshold Test (at least the 6 months maximum sentence); **or**
 - d) is the offence(s) for underage sale/supply of alcohol or tobacco/nicotine?
 - e) (for DS and CHIS) is the action proposed both necessary <u>and</u> proportionate?
 - f) have you considered alternatives, who else could be subject to any collateral intrusion and how this could be minimised?

10.3 On receipt of the RIPA URN Request Form, the Information Governance Officer will consider the contents; allocate an URN from the electronic Central Retrievable Record of Authorisations kept and maintained by them; input the data from the RIPA Request Form into the said register; complete the RIPA URN Request Form and email it back to the applicant and AO named on the form.

11. Role of Authorising Officers [AOs] and the special role of the Chief Executive

- 11.1 A person appointed to the role of "Authorising Officer" has the power to grant authorisations to carry out Directed Surveillance or CHIS. An applicant <u>must</u> obtain authorisation from one before seeking judicial approval from the court. Those currently able to act as Authorising Officers for the Council are named in Appendix 2.
- 11.2 Note the on-going duties of Authorising Officers are described by IPCO as follows: "Responsibility for authorising an activity always remains with the Authorising Officer" even after judicial approval. This includes reviewing and renewing authorisations as appropriate, and cancelling them promptly once the operation has been completed, rather than waiting for the remaining time to run out.
- 11.3 AOs are urged not to "restrict contemplation to the type of tactic rather than the specific facts of the activity. It is unwise to approach RIPA ... from the perspective of labels". There is a big difference between the type of operations conducted by the police and those run by Trading Standards.
- 11.4 It is the statutory responsibility of the Authorising Officer to establish that the proposed action is both necessary and proportionate, whereas the role of the applicant is to present the facts, giving details of the crime, proposed activity, and justification for acting covertly etc. The case should be presented in a fair and balanced way. All reasonable efforts should be made to take account of information which support or weakens the case for authorisation.
- 11.5 Authorising Officers should set out in their own words that they are satisfied or believes how and why the activity is necessary and proportionate. AOs should routinely state "who, what, when, where, how" i.e. who is to be the target of the surveillance; what action is being authorised; when it is to take place; where or at which location; and how the activity is to be done. Care must be taken over the use of words that could unintentionally limit the action for instance using 'and/or' to permit both alternatives may be necessary to avoid unintended limitation as wording in authorisations permitted by the court will be strictly construed.
- 11.6 A copy of the Authorisation Form is to be handed to the Magistrate or District Judge who considers the application. The AO will retain the original for safekeeping in the Council's RIPA records.
- 11.7 Authorising officers must conduct reviews of the activity as deemed necessary. The timing of such reviews must not be standardised or delayed,

- but as individual circumstances dictate and as seems prudent given the participants. Records of these reviews and issues considered must be kept and available for inspection by the SRO and IPCO.
- 11.8 The Chief Executive ("CEO") is one of the Council's Authorising Officers, and, as Head of Paid Service, is the only one competent to approve any action or operation that involves the recruitment of a juvenile CHIS, any other vulnerable person, or where the surveillance may result in the Council obtaining access to legally privileged or confidential information.
- 12. The Two Mandatory Tests for Directed Surveillance & CHIS

Necessity

12.1 An AO must not grant an authorisation for the carrying out of Directed Surveillance and/or CHIS for a local authority unless they believe that the authorisation is necessary for the prevention or detection of crime. In the case of Directed Surveillance, it must also meet the crime thresholds set out in paragraph 4.4 above. The AO must carefully explain in writing why it is necessary to use the covert techniques requested.

Proportionality

- 12.2 An AO shall not grant an authorisation for the carrying out of directed surveillance and/or CHIS unless they also believes that the authorisation is proportionate to what is sought to be achieved [RIPA 2000, Ss 28(2) (b) & 29(3)].
- 13. <u>Proportionality striking the balance</u>
- 13.1 This involves considering a number of factors as highlighted by s4.7 of the Code:
 - the seriousness of the intrusion into the private or family life of the target - and any other person likely to be affected (collateral intrusion);
 - balancing the size and scope of the proposed activity against the gravity and extent of the perceived crime or harm;
 - explaining how and why the methods to be adopted will cause the least possible intrusion on the subject and others;
 - considering whether the activity is an appropriate use of the legislation and a reasonable way, having considered all reasonable alternatives, of obtaining the information sought;
 - evidencing, as far as reasonably practicable, what other methods had been considered and why they were not implemented, or have been implemented unsuccessfully.
- 13.2 In simple terms officers CANNOT use a 'sledge hammer to crack a nut'.
- 13.3 Officers must explain why the particular covert method, technique and tactic is an appropriate use of RIPA and a reasonable way of achieving the

- desired objective. In particular, officers must explain why the intended surveillance will cause the least possible intrusion, and what alternative options have been tried or considered and why they were unsuccessful or not considered suitable (see paragraph 4.6 4.7 of the 2018 revised Codes).
- 13.4 The AO must take into account the risk of obtaining private information about persons who are not the subjects of the surveillance or property interference activity. Particular consideration should be given in cases where religious, medical, journalistic, or legally privileged material may be involved, or where communications between a member of parliament and another person on constituency business may be involved. An application should include an assessment of the risk of collateral intrusion and any details of any measures taken to limit this.
- 13.5 In brief, the AO must clear set out why the proposed activity is proportionate to what is sought to be achieved and take into account the risk of obtaining private information about persons who are not subjects of the surveillance activity (collateral intrusion). The AO's considerations need to be fully documented.

14. Judicial Approval

- 14.1 An Authorisation (or Renewal) for Directed Surveillance or a CHIS does not become activated until judicial approval has been obtained in writing from a Magistrate/District Judge and is both dated and timed.
- 14.2 In order to apply for Judicial Approval, the applicant must do the following:
 - a) email the the Assistant Head of Law, David Fellows (<u>David.Fellows@merton.gov.uk</u>)
 - b) the email must request a listing for an application for Judicial Approval for a RIPA Application/Renewal.
 - c) ensure that sufficient notice (5 days) so that the court can list the matter prior to the date you wish to commence the operation.
 - d) complete Form Annex B, 1st page (Appendix 5).
 - e) ensure all the information set out in the "Summary of Details," should also be contained in the Application/Renewal/Authorisation Form too, or the Application will NOT be granted.
 - f) note that the applicant cannot solely rely on the details provided during his evidence to the court. Instead, all relevant information must be set out in writing in the Application and Form B.
 - g) attend WMC for the Applications Court at the allotted time [either 9.30am or 1.30pm].

- h) take the Original Application/Renewal/Authorisation and copies along with 2 copies of the Judicial Approval Form Annex B.
- i) provide a set of papers to the court legal adviser at least 30 minutes before the hearing, so the Magistrate/ District Judge can consider the paperwork prior to the hearing.
- j) when the hearing commences, the Applicant:
 - must swear an oath OR affirm:
 - identify him/herself by name, post and employer;
 - should introduce it as an Application for Judicial Approval for RIPA Authorisation or Renewal;
 - should introduce themselves as the officer who has completed the paperwork for Merton LBC and the court;
 - should identify that the Application/Renewal etc. was granted by Merton's AO [give name] on date and time and state the role/position of the AO
 - should state that they wishes to obtain Judicial Approval for Directed Surveillance or use of a CHIS [Section 38 POFA];
 - should inform the Magistrate/District Judge that they has partly completed Form Annex B page 1.

14.3 Factors to be considered by the Magistrate/ District Judge

The Magistrate /District Judge MUST be satisfied that:-

- i) there were reasonable grounds for the local authority to believe that the Authorisation/Renewal etc. was necessary and proportionate;
- ii) there remain reasonable grounds for believing that these requirements are still satisfied at the time of the application to the Magistrate/ District Judge;
- iii) has the Application/Renewal etc. been authorised by an appropriate Authorising Officer?
- iv) has the Authorisation etc. been made in accordance with any applicable legal restrictions, for example, has the Crime Threshold Test clearly been met?
- v) in the case of a CHIS, were there reasonable grounds for believing that the arrangements exist for the safety and welfare of the source, AND that there remain reasonable grounds for believing that these requirements are satisfied at the time when the Magistrate/District Judge is considering the matter.

14.4 Outcomes

There are 3 possible outcomes for an Application for Judicial Approval:-

- a) Application Granted effective from that date and time;
- b) Refuse to grant or renew the Authorisation [Applicant can then re-apply once the gap/error has been corrected];

- c) Refuse to grant or renew the Authorisation AND quash the AOs Authorisation.
- [Note: the Magistrate/District Judge can only quash the Authorisation if the Applicant has had at least 2 business days' notice, from the date of refusal, in which to make representations against the refusal.]
- 14.5 Procedure once Judicial Approval Granted
- 14.5.1 If granted, the Authorisation/Renewal will be dated and timed. The 3 months (for DS) or 12 months (for a CHIS) validity will run from this date and time. The Magistrates will keep a <u>copy</u> of the completed and signed Form Annex B. The Applicant will be provided with the <u>Original signed version</u> of Form Annex B.
- 14.5.2 If the Application is for Directed Surveillance or CHIS, the Information Governance Officer should be provided with the Original Judicial Approval Form Annex B within 5 days, and retain a scanned copy in their electronic investigation file as a record. This will also fulfil disclosure obligations if the matter proceeds to a criminal prosecution.
- 14.5.3 Please note that the Authorisation will automatically expire unless a Renewal Application is made prior to its expiration and Judicial Approval is also obtained.
- 14.5.4 Applicants and AOs must be proactive about diarising, renewing and cancelling authorisations as appropriate.
- 15. Forms to be used
- 15.1 The following link should be used at all times, to access the Home Office's website RIPA Form page:
 - https://www.gov.uk/government/collections/ripa-forms--2
- 15.2 Separate Directed Surveillance and CHIS forms can be found here, as can forms required for the renewal and cancellation of both types of activity.
- 15.3 Care should be taken with these forms, as they have not been revised since 2007 and cover the circumstances for a wide variety of other bodies, including the Police and Security Services.
- 16. Other useful definitions and guidance
- 16.1 RIPA for Merton Council CCTV
- 16.1.1 Directed Surveillance requests for access to Merton Council's CCTV must comply with the RIPA CCTV protocol.
- 16.1.2 The Council will only allow the Police and other third parties to use its CCTV systems to carry out targeed covert surveillance (which includes the disclosure of recordings) in the Borough of Merton if the requirements of the protocol are adhered to.

- 16.1.3 All visitors to the CCTV room must also complete the visitors' signing-in book giving relevant details of the operation involved and the specific CCTV cameras to be used.
- 16.1.4 Records are to be retained for inspection by the Information Commissioner's Office (IPC), Surveillance Camera Commissioner (SCC), IPCO and SRO as and when required.

16.2 Confidential Information

16.2.1 Confidential personal information (such as medical records or spiritual counselling, confidential journalistic material, confidential discussions between Members of Parliament and their constituents), or matters subject to legal privilege requires particular consideration. Unwarranted access to them during an investigation may be grounds for cancelling the Authorisation.

16.3 <u>Duration of Authorisation</u>

- 16.3.1 The duration for authorised surveillance is as follows:
 - a) 3 months for Directed Surveillance ("DS"), or
 - b) 12 months for a CHIS from grant of Judicial Approval,
 - c) four months for a juvenile CHIS.

16.4 Reviews

- 16.4.1 Regular reviews are required once the authorisation has been granted. The frequency should be determined by the AO. If it is intended to be a short operation, a timely review should be conducted shortly thereafter, to determine if the authorisation is still required or if the operation is complete, which would then require the operation to be cancelled [see below].
- 16.4.2 Any proposed or unforeseen changes to the nature or extent of the activity that may result in the further or greater intrusion into the private life of any person should also be brought to the attention of the Authorising Officer by means of a review. The Authorising Officer should consider whether the proposed changes are proportionate before approving or rejecting them. Any such changes must be highlighted at the next renewal, if any. Where unidentified individuals become identified the terms of the authorisation should be refined at a review to include the identity of these individuals. It would be appropriate to convene such a review specifically for this purpose. This process will not require a fresh authorisation, providing the scope of the original authorisation envisaged surveillance of such individuals. Such changes must be highlighted at the next renewal if appropriate. During a review the Reviewing Officer may cancel aspects of the authorisation.

16.5 Renewals

16.5.1 Renewals must take place prior to the authorisation expiring; otherwise, the authorisation will automatically expire in accordance with the surveillance authorisation limits. Please note, Judicial Approval is required for a Renewal and the Applicant must follow the procedure set out above.

Please factor in sufficient time to obtain it well before the Authorisation expires.

16.6 Cancellation

The officer has a duty to request the AO cancel the authorisation, where the authorisation no longer meets the criteria upon which it was originally authorized, for example, a fly-tipping hotstop may be subject to directed surveillance for 14 days, thereafter the authorisation is no longer required. In such cases, it is not permissible (nor good practice) to let the authorisation run on until its natural expiry. Officers must be pro-active in this.

- 17. Central Record of Authorisations and Record Keeping
- 17.1 A Centrally Retrievable Record ("CRR") of all authorisations is held by the Council and regularly updated whenever an authorisation is granted, renewed or cancelled. These records should be retained for a period of at least 7 years from the ending of the authorisation.
- 17.2 London Borough of Merton ("LBM")'s CRR of all authorisations is kept and maintained by the Information Governance Team Leader. Please see section 10 regarding the mandatory requirement to complete a RIPA Request Form and to obtain an URN.
- 17.3 All <u>original applications</u>, reviews, renewals and cancellation forms are to be served <u>by hand</u>, on the Information Governance Team Leader within <u>5 days</u> of the grant of Judicial Approval, and stored in locked cabinets.
- 17.4 To avoid any suggestion that an authorisation has been simply signed off by an AO, it is recommended that a copy is retained with the AO's 'wet signature'. The Council must be ready to provide the relevant witness if authenticity is ever questioned in court.
- 7.15 Sections 37 to 44 of the Police, Crime, Sentencing & Courts Act (PCSCA) 2022 came into force on 8 November 2022. This provides Merton Council with a further power to extract data held on electronic devices. Before action is taken, there must be a reasonable belief that information stored on the device will be relevant for one of three scenarios and satisfaction that the extraction of the information is necessary and proportionate to achieve the purpose.
- 7.16 The three scenarios provided under s37 (2) PCSCA are for the purpose of:
 - (a) preventing, detecting, investigating or prosecuting crime;
 - (b) helping to locate a missing person; or
 - (c) protecting a child or an at-risk adult from neglect or physical, mental or emotional harm.
- 7.17 To ensure any extraction of stored communication under s.37 PCSCA remains lawful, it is essential that the criteria and procedures set out within the PCSCA and the association Code of Practice are fulfilled. A failure to follow these procedures correctly could result in a s.3 Investigative Powers Act (IPA) 2016 offence (unlawful interception) being committed.
- As recommended by the IPCO, the Council will maintain a separate auditable record of any decisions and actions under RIPA which will be available to the SRO for scrutiny and the Investigatory Powers Tribunal ('IPT'), Page 29

established under Part IV of the 2000 Act, to carry out its functions (see section 11 of the Code of Practice for more information on the IPT).

- 18. <u>Senior Responsible Officer (SRO)</u>
- 18.1 Under the relevant Home Office Codes for surveillance, CHIS and Communications Data, the SRO is responsible for-
 - the integrity of the process in place within the public authority for the management of CHIS and to acquire communications data.
 - engagement with officers in the Office for Communications Data Authorisations (where relevant).
 - compliance with Part II of the RIPA 2000 and Part 3 of IPA and with the relevant Codes of Practice.
 - oversight and prompt reporting of errors in accordance with the Codes of Practice to the IPCO and the identification of both the causes of errors, and the implementation of the processes to minimise repetition of errors; (for example, carrying out surveillance without proper authorisation).
 - ensuring the overall quality of applications submitted to OCDA by the Council.
 - engagement with the IPCO inspectors when they conduct their inspections
 - where necessary, oversight of the implementation of post inspection action plans approved by the IPCO.
- 18.2 Within a Local Authority, the SRO must be a member of the corporate leadership team, and is responsible for ensuring that all AOs are of an appropriate standard in light of any recommendations in the inspection reports prepared by the IPCO. To avoid role conflict, the SRO should never act as an AO.
- 18.3 Please see Appendix 1 for the current SRO details, who is also a member of the corporate leadership team.
- 19. RIPA Reviews/Reports
- 19.1 Given the substantial reduction in the use of RIPA powers since 2015, Merton Council only holds meetings to review the operation of RIPA as and when deemed necessary by the SRO, or if requested by the AOs or any Head of Department using RIPA. Reports are made to the Corporate Management Team as necessary.
- 19.2 Councillors shall receive an annual report to allow them to consider and review the adequacy of the Council's policy and practice on RIPA matters. The Council's policy and procedures are reported to the Standards and General Purposes Committee.

20. The use of the internet and social media for investigative purposes

- 20.1 With advances in technology making it easier, quicker and increasingly popular for individuals to share personal information online, the opportunities to use that information for research, investigative or other official purposes are expanding too.
- 20.2 However, it is important to appreciate that the considerations of privacy, which arise in the physical world, also arise in the online world: to which there are rules and limits.
- 20.3 Just because the content of many social media sites and other information on the internet is freely accessible does not mean that officers can openly access such information without careful regard to the constraints and requirements of the law.
- 20.4 Repeated or systematic viewing, collecting or recording of private information from 'open' online sources (such as Facebook, X, Tiktok, Snapchat, Youtube, WhatsApp and LinkedIn), including information relating to the interests, activities and movements of individuals, and others associated with them, could be regarded as a form of covert surveillance.
- 20.5 In addition, it is likely that individuals will have a reasonable expectation that their information is not used for surveillance purposes by public authorities and therefore may complain that their privacy and human rights have been infringed.
- 20.6 Initial research via social media to establish or check some basic facts is unlikely to require an authorisation for directed surveillance, <u>but repeated visits to build a profile of an individual's lifestyle etc. is likely to do so depending on the particular facts and circumstances</u>. This is the case even if the information is publicly accessible because the individual has not applied any privacy settings.
- 20.7 The creation of fake profiles or any attempt to make 'friends' online for the covert purpose of obtaining information may constitute directed surveillance or, depending on the nature of the interaction or the manipulation of the relationship, a CHIS. An example would be where officers create fake profiles to investigate someone suspected of selling counterfeit goods.
- 20.8 Any officer wishing to deploy such tactics as part of an investigation must remember before seeking authorisation and judicial approval, any evidence collected may be deemed inadmissible in any subsequent prosecution. Cases should be carefully considered on an individual basis, and the issues of necessity and proportionality always borne in mind.
- 20.9 This section should be read in conjunction with the guidance contained in the updated Codes of Practice (links shown below) which offer some helpful examples:
 - For Surveillance see paragraphs 3.10 to 3.17 <u>CHIS Code</u> (<u>publishing.service.gov.uk</u>)

- For CHIS see paragraphs 4.29 4.35 <u>CHIS Code draft formatted</u> (publishing.service.gov.uk)
- 20.10 It is also important to appreciate that if officers obtain, use or even merely store information about individuals they will have to comply with data protection legislation. It should be noted that the information the Council collects about individuals, how it collects it and uses it will have to comply with stricter transparency and accountability rules under Data Protection Act 2018 and General Data Protection Regulation (GDPR). Readers are referred to the Council's Data Protection Policy and all the other related Council Information Governance policies.

21. Training & Monitoring

- 21.1 In order to be an AO, all officers must have attended a suitable training course. Any new AO will be appointed by the SRO, who will ensure that all AO's receive regular updates and training, as and when required.
 - All officers utilising RIPA for Directed Surveillance and/or CHIS must also have attended a suitable training course.
- 21.2 Whilst undertaking audits of the RIPA CRR of Authorisations and RIPA forms, the SRO will identify any training needs for staff and/or monitoring issues, to be raised either with individual AO's and/or at any RIPA Meetings.
- 21.3 The Council's policy commitment is that appropriate RIPA training will be provided to relevant staff members every three years. In addition, RIPA updates/ advice notes and briefings will be provided to relevant staff from time to time. However, where staff already receive training as part of their professional accreditation or development, that will be taken into account when assessing their needs.

22. Investigatory Powers Commissioner's Office (IPCO)

- 22.1 The IPCO is the supervisory body for RIPA and deals with the following:
 - requests for RIPA statistical information
 - inspections of Local Authorities including Merton Council, usually every 3 years;
 - publication of regular reports on RIPA activity.

23. Collaboration with other authorities/agencies

- 23.1 The Council shall endeavor to conclude written collaboration agreements with any other authorities with whom it works regularly, such as the Police or neighbouring Trading Standards Authorities.
- 23.2 Prior to any activity, where the Council uses external partners or agents the Council will seek their written acknowledgement that they:
 - will act as an agent of the Council
 - have seen the written Authorisation for the activity they are undertaking

- will comply with the specific requirements permitted by the Authorisation
- recognise they may be subject to inspection by the IPCO for RIPA activity

24. Codes of Practice

- 24.1 As mentioned above the Home Office publishes Codes of Practice giving guidance on the use of RIPA by public authorities. The current editions were published in 2018 pursuant to section 71 of RIPA 2000. There is a separate Code concerning Communications Data which is not covered in detail in this Policy.
- 24.2 The Home Office Codes are **admissible in evidence** in any court proceedings, and must be taken into account. Public authorities like the Council may be required to justify the use, granting or refusal of authorisations by reference to the Codes.
 - 24.3 Care must be taken when referring to the Codes over the terminology used, and to their applicability to the Council. The Codes provide guidance to a much wider range of public authorities than the Council. Unfamiliar terms like "relevant sources" may not apply to the Council at all, and may confuse the lay reader. Please ensure you seek legal advice on the correct interpretation if you are unsure.
- 24.4 The three Codes of practice now in force and of concern to the Council (and accessible through the Home Office website) are:
 - Covert Surveillance & Property Interference
 - Covert Human Intelligence Sources
 - Communications data

CHIS Code (publishing.service.gov.uk)

<u>Covert human intelligence sources: draft code of practice - GOV.UK (www.gov.uk)</u>

https://assets.publishing.service.gov.uk/media/641adb48e90e0769f373364e/Communications Data Code of Practice.pdf

Home Office guidance if provided to local authorities when on seeking judicial approval at

https://assets.publishing.service.gov.uk/media/5a7b036640f0b66eab99e4fc/local-authority-england-wales.pdf

25. Data Protection Act 2018

- 25.1 Care must be taken to ensure that information received through directed surveillance is handled in accordance with the relevant legislative requirements and in accordance with the Council's information governance requirements.
- 25.2 Dissemination, copying and retention of material must be limited to the minimum necessary for authorised purposes.

25.3 Destruction

Information obtained through covert surveillance or property interference, and all copies, extracts and summaries which contain such material, should be scheduled for deletion or destruction and securely destroyed as soon as they are no longer needed for the authorised purposes as set out in paragraph 9.5 of the Code. If such information is retained, it should be reviewed at appropriate intervals to confirm that the justification for its retention is still valid. In this context, destroying information means taking such steps as might be necessary to make access to the data impossible.

26. Consequences of non-compliance with RIPA

Where covert surveillance work is being proposed for matters which fall within the ambit of RIPA 2000, this policy and procedure must be strictly adhered to in order to protect both the Council and individual officers from the following:

- Inadmissible Evidence and Loss of a Court Case: there is a risk that, if Covert Surveillance and Covert Human Intelligence Sources are not handled properly, the evidence obtained may be held to be inadmissible in court proceedings by virtue of s78 Police and Criminal Evidence Act (PACE) 1984. Section 78 provides for evidence, that was gathered in a way that affects the fairness of the criminal proceedings, to be excluded. The Common Law Rule of admissibility means that the court may exclude evidence because its prejudicial effect on the person facing the evidence outweighs any probative value the evidence has (probative v prejudicial test).
- 26.2. **Legal Challenge** –Article 8 of the European Convention on Human Rights, establishes a "right to respect for private and family life, home and correspondence". Any potential breach could give rise to an application for judicial review proceedings in the High Court by the aggrieved person.
- 26.3. **Censure** the IPCO conduct regular audits on how Local Authorities implement RIPA and IPA. If it is found that a Local Authority is not implementing RIPA/IPA properly, then this could result in censure.
- 26.4 Complaint to The Investigatory Powers Tribunal ("IPT"): Any person who believes that his or her Article 8 rights have been unlawfully breached by an authority using the RIPA authorisation process may submit a complaint the IPT. This Tribunal is made up of senior members of the judiciary and the legal profession. It is independent of the Government and has full powers to investigate and decide any case within its jurisdiction and award compensation. It will consider complaints made up to one year after the conduct to which the complaint relates and, where it is equitable to do so, may consider complaints made more than one year after the conduct to which the complaint relates (see section 67(5) of the Act), particularly where continuing conduct is alleged.

Any action commenced in paras 26.1-26.4 above may have financial and reputational implications for the council as well as affect its ability to utilise RIPA.

- 27. Case to Note: Case of Gary Davies v British Transport Police (IPT/17/93/H)
- 27.1 On 30/04/2018, the IPT awarded £25,000 to reflect the gravity of the breach and damage suffered and a further award of £21,694 in respect of costs, total compensation award of £46,694 to an individual who complained about surveillance by British Transport Police. This case involved surveillance carried out without proper authorisation and without proper compliance with all the relevant provisions of RIPA 2000. The tribunal indicated that in their view none of the officers involved in the matter demonstrated an adequate knowledge of the relevant requirements of RIPA. The Tribunal's conclusion was that no authorization could properly have been granted and, if one had been, it would have been unlawful.
- 27.2 The above case shows that the importance and extent of financial penalties that can be imposed by failing to adhere to provisions of this Policy, the IPA, RIPA and the relevant Codes of Practice.

Further advice and or assistance on the Council's RIPA policy and procedures can be obtained from Legal Services.

Contact Details:

David Fellows Assistant Head of Law South London Legal Partnership (in-house legal team to Merton Council)

Tel: 020 8545 4568

David.Fellow@merton.gov.uk

APPENDICES

APPENDIX 1: Senior Responsible Officer (SRO) Contact Details

John Scarborough, Managing Director of South London Legal Partnership, and Monitoring Officer: <u>John.scarborough@merton.gov.uk</u>

APPENDIX 2: List of Authorising Officers and Contact Details

Margaret Culleton – Head of Internal Audit; margaret.culleton@merton.gov.uk; 020 8545 3149

John Bosley – Assistant Director of Public Space Contract and Commissioning; John.Bosley@merton.gov.uk; 020 8545 3190

APPENDIX 3: Senior Enforcement Lawyer

Gary Ward – Senior Lawyer (Enforcement and Licensing); Gary.Ward@merton.gov.uk 020 8274 5242

(The task of identifying relevant offences and advising generally in relation to RIPA and DC may be assigned to other appropriate members of the SLLP Enforcement Team)

APPENDIX 4: Designated Senior Officer's Contact Details

Communications Data Designated Senior Officer: James Armitage, Head of Regulatory Services: James.Armitage@merton.gov.uk; 020 8545 1234

Appendix 5 (Annex B: Judicial application/order form)

Application for judicial approval for authorisation to obtain or disclose communications data, to use a covert human intelligence source or to conduct directed surveillance. Regulation of Investigatory Powers Act 2000 sections 23A, 23B, 32A, 32B.

Local authority:
Local authority department:
Offence under investigation
Address of premises or identity of subject:
Covert technique requested: (tick one and specify details)
Directed Surveillance
Covert Human Intelligence Source
Summary of details
Note : this application should be read in conjunction with the attached RIPA authorisation/RIPA application or notice.
Investigating Officer:
Authorising Officer/Designated Person:
Officer(s) appearing before JP:
Address of applicant department:
Contact telephone number:
Contact email address:
Local authority reference:
Number of pages:

Wimbledon Magistrates' Court

Order made on an application for judicial approval for authorisation to use a covert human intelligence source or to conduct directed surveillance. Regulation of Investigatory Powers Act 2000 sections 23A, 23B, 32A, 32B Magistrates' court.

Havin	g considered the application, I (tick one):
	am satisfied that there are reasonable grounds for believing that the requirements of the Act were satisfied and remain satisfied, and that the relevant conditions are satisfied and I therefore approve the grant or renewal of the authorisation/notice.
	refuse to approve the grant or renewal of the authorisation/notice.
	refuse to approve the grant or renewal and quash the authorisation/notice.
Notes	
Reaso	ons
Signe Date: Time: Full na	(Justice of the Peace/District Judge)

Appendix 6: Arrangements for Non-RIPA activity

- 1. There may be occasions when during the course of an investigation it may become necessary to conduct surveillance of individuals in respect of matters that do not satisfy the crime threshold. For example, in relation to an investigation into an allegation that a contractor is not carrying out their work as contracted, a serious disciplinary offence by a member of staff is alleged e.g. gross misconduct, or children are at risk where Court Orders are not being respected, then a RIPA authorisation is not usually available because criminal proceedings are not normally contemplated.
- Similarly, there may be serious cases of neighbour nuisance or involving antisocial activity which involve potential criminal offences for which the penalty is below the thresholds which would enable use of a RIPA authorisation. Nonetheless in such cases there may be strong grounds for carrying out directed surveillance or use of a CHIS. Indeed there may be circumstances in which directed surveillance or use of CHIS is the only effective means of efficiently obtaining significant information to take an investigation forward.
- 3. A person may make a claim or a complaint to the Investigatory Powers
 Tribunal should they consider the use of directed surveillance or use of a CHIS
 infringed their Article 8 rights. It would be then for the Council to satisfy the IPT
 that such infringement was justified, necessary and proportionate in pursuit of a
 legitimate aim. Completing the Non-RIPA application forms provides a written
 record of those matters taken into account at that time regarding justification,
 necessity and proportionality.
- 4. In these circumstances, the investigating officer is required to go through the RIPA authorisation process in terms of considering: a) Why there is no other alternative to undertaking the directed surveillance; b) Why the surveillance is necessary; and, c) How it is proportionate in the circumstances.
- 5. The investigating officer is required to complete a 'non-RIPA' authorisation form (in the same terms of a RIPA form but clearly marked 'NON-RIPA'). The application must be submitted to an Authorising Officer for approval.
- 6. Where it is deemed that the above-mentioned criteria have been satisfied, the non RIPA surveillance should be monitored and reviewed in accordance with the existing Council policy. The same arrangements for RIPA authorisations are followed for Non-RIPA authorisations, that is, a Non-RIPA URN is required; the operation is subject to review and cancellation; and records are retained in the same way and are to be made available to an IPCO, if requested. In the event of a claim or complaint made to the IPT it shall be essential to have such records to demonstrate the activity was justified, necessary and proportionate.

Test purchase exercises

7. If no application for directed surveillance is made in relation to a test purchase exercise involving juveniles the 'Non RIPA Activity' procedure shall be followed. On completion of the test purchase exercise a written record shall be made of the review of the exercise, including an assessment of the risks of private

information being obtain and the risk of collateral intrusion. Regard shall be had to the reviews before embarking on successive test purchase exercises.

Committee: Standards and General Purposes Committee

Date: 5 March 2024

Agenda Item

Wards: Lower Morden, Wimbledon Town and Dundonald

Subject: Review of Polling Places

Lead officer: Polly Cziok, Director of Innovation and Change

Lead member: Councillor Billy Christie

Contact officer: Andrew Robertson, Head of Electoral Services

Recommendations:

A. That the Standards and General Purposes Committee agrees that the Morden Park Baptist Church replaces Morden Assembly Hall as a polling place for polling district AB in Lower Morden ward.

B. That the Standards and General Purposes Committee agrees that the Wimbledon College of Art replaces St Marys Church Hall as a polling place for polling district PE in Wimbledon Town and Dundonald ward.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 In Lower Morden Ward, a new polling place is required because the immediate future of the Morden Assembly Hall has become unclear, having been earmarked as a saving by the council during the budget setting process. Therefore, Electoral Services believes it is prudent to change the polling place ahead of the May 2024 GLA elections.
- 1.2 In Wimbledon Town and Dundonald ward, the Wimbledon College of Art has recently volunteered its premises for use as a polling station, as an alternative to the St Marys Church Hall.

2 DETAILS

LOWER MORDEN WARD

- 2.1 In Lower Morden ward, the current polling station for polling district AB is the Morden Assembly Hall. This building has put up as a saving during the budget setting process, meaning that it may not be available to use as a polling station for the upcoming May elections.
- 2.2 Fortunately, there is a viable alternative polling place located next door to the Morden Assembly Hall. The Morden Park Baptist Church was used as a replacement polling station for the 2021 GLA elections, when the Morden Assembly Hall was being utilised as a Covid vaccination hub and pharmacy. The Church worked well as a polling station on this occasion, with no significant issues. The Church has ample space inside the building to house the 2 polling stations required for this polling district, and benefits from step free access and parking.

- 2.3 Being located next door to the Morden Assembly Hall, it is expected that the switch to the Morden Park Baptist Church will minimise any disruption for electors located in AB polling district. Voters who usually visit the Assembly Hall in order to vote will even be able to use the same car park if they are driving to the polling station.
- 2.4 In a further measure to allay any confusion that may be experienced by electors, signage will be displayed on the Morden Assembly Hall directing voters to the Morden Park Baptist Church.

WIMBLEDON TOWN AND DUNDONALD WARD

- 2.5 In 2021, when the Local Government Boundary Commission conducted a review of Merton's wards, the boundary lines between Merton Park ward and Dundonald ward (since renamed Wimbledon Town and Dundonald ward) were altered. This meant that those properties in the roads to the north of Kingston Road (Chatsworth Avenue, Merton Hall Road, Quinton Avenue, Richmond Avenue, Rothesay Avenue, and Sandringham Avenue) were moved from Merton Park ward to Wimbledon Town and Dundonald ward. Electoral Services allocated these properties to the newly created polling district PE. These changes took effect at the May 2022 Local elections.
- 2.6 Prior to the 2022 elections, Electoral Services attempted to find an alternative polling station venue for the residents of polling district PE to prevent these electors travelling out of ward to vote. Unfortunately, this attempt was unsuccessful. At the elections PE electors voted at the St Marys Church Hall, in Merton Park ward, as they had previously.
- 2.7 In 2023 Electoral Services conducted another statutory review of polling places and again tried to find an alternative polling station for the residents of polling district PE. The Wimbledon College of Art was highlighted as a possible alternative venue and was also suggested by the Liberal Democrat group and Wimbledon Town and Dundonald ward Councillors. Unfortunately, the Wimbledon College of Art did not respond to enquiries in time for the end of the review, so at the November 2023 SGP meeting, Electoral Services agreed to revisit this issue in the near future.
- 2.8 The Wimbledon College of Art responded to Electoral Services in December 2023. Electoral Services visited the venue shortly afterwards and have adjudged it as being a suitable for use as a polling station. The venue is located in Wimbledon Town and Dundonald ward, on Merton Hall Road, and sits slightly outside of polling district PE in polling district PA. The venue is a shorter distance to travel for electors residing in polling district PE than the St Marys Church Hall. The Wimbledon College of Art should also be relatively well known to local residents.
- 2.9 The college have offered the use of a room which is adjacent to their main reception area. The venue has step free access but does not have parking.

3 ALTERNATIVE OPTIONS

LOWER MORDEN WARD

- 3.1 The main alternative to using the Morden Park Baptist Hall would be to keep the polling station at the Morden Assembly Hall, however, this carries the risk that the hall may not be available for the May 2024 elections.
- 3.2 The Morden Brook pub is located opposite the Morden Assembly Hall and Morden Park Baptist Church, but does not benefit from a function room that could be used as a polling station. Aragon Primary School and Hatfeild Primary School are also located within polling district AB, but it would not be preferable to close a school for polling with there being alternative options available such as the Morden Park Baptist Church.

WIMBLEDON TOWN AND DUNDONALD WARD

- 3.3 There are no prospective polling station venues within polling district PE, so the only real alternative to using the Wimbledon College of Art as a polling station is the St Marys Church Hall. Electors in polling district PE have visited the St Marys Church Hall at previous elections, but it is a longer distance to travel for electors than the Wimbledon College of Art, and it is located in a different ward.
- 3.4 Other alternative venues in the vicinity include the Wimbledon Chase Primary School, the Dundonald church, and the Cricket Pavilion at John Inness Recreation Ground. The Wimbledon Chase Primary School is located behind the Wimbledon College of Art on Merton Hall Road but would likely be required to close on polling day. The Dundonald Church on Kingston road has recently volunteered it's services as a polling station and would be convenient for PE electors to visit, however, it is located out of ward in Raynes Park, and has already been allocated as a double polling station for polling district LE. The Cricket Pavilion is also located nearby to polling district PE but is already in use as a polling station for the residents of polling district RA in Merton Park ward. The Cricket Pavilion is only large enough to house one polling station.

4 CONSULTATION UNDERTAKEN AND OUTCOMES

LOWER MORDEN WARD

- 4.1 All councillors for Lower Morden ward and on this Committee have already been consulted and are in agreement with the proposal to designate the Morden Park Baptist Church Hall as the polling station for polling district AB.
- 4.2 It is the view of the Returning Officer that the Standards and General Purposes Committee agrees the designation of the Morden Park Baptist Church Hall for polling district AB in Lower Morden ward.

WIMBLEDON TOWN AND DUNDONALD WARD

- 4.3 All councillors for Wimbledon Town and Dundonald ward and on this Committee have been consulted and are in agreement with the proposal to designate the Wimbledon College of Art as the polling station for polling district PE.
- 4.4 It is the view of the Returning Officer that the Standards and General Purposes Committee recommends that the council agrees the designation of the Wimbledon College of Art for polling district PE in Wimbledon Town and Dundonald ward.

5 TIMETABLE

5.1 The Standards and General Purposes meeting on 5 March 2024 should make the decision on these proposals so that polling districts AB and PE have the preferred designated polling places for the elections on 2 May 2024.

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

6.1 Provision for the hire of buildings for use as polling places is included within the budget for the GLA elections to be held on 2 May 2024.

7 LEGAL AND STATUTORY IMPLICATIONS

7.1 The Council has a duty under the Representation of the People Act 1983 (RPA 1983) to divide its area into polling districts for parliamentary and local government elections, to designate a polling place for each polling district, and to keep these under review. The Local Authorities (Functions and Responsibilities) (England) Regulations 2000¹ list section 18 of the RPA1983 as one of the functions that are not to be the responsibility of an authority's executive. This function has not been specifically delegated by the Council.

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 8.1 Under section 149 of the Equality Act 2010 it is the duty of a public authority in the exercise of its functions to have due regard to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
 - Advance equality of opportunity between people who share a protected characteristic and those who do not;
 - Foster good relations between people who share a protected characteristic and those who do not.

			•		11.4		
Having	due	regard	t∩r	advancing	eanalit/	/ inv/o	IV/PS:
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¹ SI 2000/2853

- Removing or minimising disadvantages suffered by people due to their protected characteristics;
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people;
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionally low.
- 8.2 In providing services and access to them the Council is required by law to make reasonable adjustments in order to avoid discriminating against disabled persons. When considering what adjustments should be considered as reasonable the council is required to have regard to the relevant code of practice. The following are some of the factors to be taken into account when considering what is reasonable:
 - Whether taking any particular steps would be effective in overcoming the substantial disadvantage that disabled people face in accessing the services in question;
 - The extent to which it is practicable for the service provider to take the steps;
 - The financial and other costs of making the adjustment;
 - The extent of any disruption which taking the steps would cause;
 - The extent of the service provider's financial and other resources;
 - The amount of any resources already spent on making adjustments; and
 - The availability of financial and other assistance.
- 8.3 The right to free elections forms part of Article 3 of Protocol 1 of the Human Rights Act 1998. Any resident is entitled to vote, if qualified by age and nationality, and if not subject to any other legal incapacity.
- 8.4 As indicated above, the principles have been followed of seeking to ensure that all electors have such reasonable facilities for voting as are practicable in the circumstances, and seeking to ensure that so far as is reasonable and practicable every polling place is accessible to electors who are disabled. There is a commitment to ensure that all polling places are accessible.
- 8.5 The aim of enhancing community cohesion and engagement would be expected to be achieved by the principles in 8.1 and 8.2 through promoting democratic engagement by seeking to make voting in person as easy as possible for residents of all communities.

9 CRIME AND DISORDER IMPLICATIONS

9.1 Integrity plans are maintained for elections. These involve working closely with Merton Police on operational matters, together with liaising with the Metropolitan Police Service officer specifically delegated with responsibility for potential election offences.

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1 In reviewing polling places, the reasonable facilities for staff at polling stations during elections have been considered. The physical fabric of possible polling places has also been considered to reflect the need for members of the public to visit their polling station.

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- a) Map of Lower Morden ward with location of Morden Assembly Hall, and Morden Park Baptist Church.
- b) Photographs of the Morden Park Baptist Church.
- c) Map of Wimbledon Town and Dundonald Ward with location of St Marys Church Hall and the Wimbledon College of Art.
- d) Photographs of Wimbledon College of Art.

12 BACKGROUND PAPERS

 Reports on polling stations made by Electoral Services staff, by presiding officers and polling station inspectors at past elections. **Committee: Standards and General Purposes Committee**

Date: 5 March 2024

Wards: All Wards

Subject: Internal Audit Progress report 2023/24

Lead officer: Asad Mushtaq Executive Director of Finance and Digital

Lead member: Martin Whelton Chair of Standards and General Purposes Committee

Contact officer: Margaret Culleton - Head of Internal

Audit margaret.culleton@merton.gov.uk

Recommendations:

A To note the Internal Audit progress report.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1 In April 2023, the Standards and General Purposes Committee agreed to an Annual Audit Plan comprising a total of 765 chargeable days. This report summarises Internal Audit's progress in delivering the Annual Audit Plan up to February 2024.

Details

- 2.1 The Accounts and Audit Regulations 2015 require an adequate and effective internal audit of accounting records and the system of internal control in accordance with proper practices. This task has been delegated to the responsible finance officer under Section 151 of the Local Government Act 1972. At Merton, the role of the responsible finance officer is fulfilled by the Executive Director of Finance and Digital and the internal audit requirement is met through the South West London Audit Partnership (SWLAP), which Merton joined in October 2015.
- 2.2 Internal Audit follows the Public Sector Internal Audit Standards (PSIAS). These standards comprise the public sector interpretation of existing standards set by the Chartered Institute of Internal Auditors. As supplementary guidance, specific to the local government sector, an application note has been issued by CIPFA/IIA; this guidance establishes the requirement for interim reporting [of Internal Audit activity] during the year and the report is designed to meet that requirement.

Internal Audit Progress

2.3 The agreed deliverable audit days is 765 days, based upon the original audit plan agreed at committee 27 April 2023, which included 34 pieces of work. The table shown below summarises the progress of audit activity since April 2023.

2023/24 Audit Plan	Audits
Number of final audits	25
Number of audits at draft stage	5
Number of audits in progress	7
Total	37

- 2.4 Thirty audit assurance opinions have been issued since April 2023, categorised as follows:
 - 1 (3%) **Substantial Assurance** audit opinion
 - 23 (77%) **Reasonable Assurance** audit opinions
 - 6 (20%) Limited Assurance audit opinions
 - 0 (0%) **No Assurance** audit opinions.

222 audit recommendations were issued to management, of which:

23 (10%) were Priority 1

172 (78%) were Priority 2

27 (12%) were Priority 3

- 2.5 The originally agreed audit plan may change as areas of higher risk are identified, or requirements to complete an investigation on an area of concern. Scheduled audit may then be moved to next year's audit plan.
- 2.6 Appendix A includes details of the results of all individual audit assignments that were initiated during the period up to February 2024, including the draft audits and recommendations, which may be subject to change.
- 2.7 Each audit is given an opinion based on 4 levels of assurance depending on the conclusions reached and the evidence to support those conclusions. Members and management should note that the assurance level is an opinion of controls in operation at the time of the audit.
- 2.8 In addition, each recommendation emanating from the audit review is given a priority rating of 1, 2 or 3 for implementation, with priority 1 being a high risk requiring immediate attention. All recommendations are followed up by Internal Audit to ensure that they have been implemented.
- 2.9 The year-end position on all work undertaken during 2023/24, including any third-party assurances, will be evaluated, and reported in July 2024 and used to determine the Head of Audit's annual opinion on the Council's internal control environment.

Advisory reviews

- 2.10 Internal Audit undertake advisory reviews as well as signing off grant claims and accounts. To date the following accounts and grant returns have been reviewed and signed off by the Head of Internal Audit.
 - Merton and Sutton Joint Cemetery account
 - Mayors accounts
 - Adult Weigh Management grant
- 2.11 The work currently undertaken as advisory reviews are: -
 - Financial procedures and Financial Regulations advisory work and input for an on-going review, being undertaken by Finance.
 - Co-ordinate the Councils Annual Governance Statement (input from all areas of the Council, self-assessments from Directors and Assistant Directors on the Internal Control's and Governance arrangements in place in their areas of responsibility)
 - Attendance at the Corporate Risk Management Group
 - Lead on the Whistleblowing Monitoring group (Head of Audit, Monitoring Officer, Head of HR and Legal). Co-ordinator of whistleblowing register.
 - Other ad-hoc advice on all potential fraud concerns and weaknesses in internal control. Anti-fraud policies review and update.

Financial Systems

2.12 The Audit Plan includes the following key financial systems in 2023/24. The status of these reviews are as follows: -

System	Progress
Accounts Payable	Final -Reasonable
Accounts Receivable	Final - Reasonable
Payroll	booked April 2024
Cash & Bank -Direct Debits -E returns	Final- Reasonable In progress
Pension Administration	Final- Reasonable
Business Rates	Final- Reasonable
Council Tax	Final- Reasonable

Data Analytic Work

- 2.13 Internal Audit undertake quarterly reviews of payments through our Accounts Payable system, to identity any potential duplicate payments. There are controls built into the E5 system to reduce the risk of duplicates, but these may still occur where for instance duplicate purchase orders are raised. Our data analysis results identify all potential duplicates, based on the value of the invoice and invoice numbers. The results are all then passed to the Accounts Payable team to check whether they are duplicates and to seek recovery. The results of the duplicate amounts confirmed for each quarter are provided below. We will continue to run quarterly duplicate payment checks going forward.
 - Quarter 1-(April-June) -No duplicates
 - Quarter 2- (July to September)- £1,111.80 duplicate payments
 - Quarter 3 (October to December)-£4,119.57 duplicate payments
- 2.14 The duplicates amounts will be recovered.

School Audits

- 2.15 School audits are designed to assess their corporate governance, compliance with the Council's Scheme for Financing Schools, and financial management arrangements. The current status of the reviews undertaken or planned are as follows: -
 - St Matthews Primary and Nursery School Final Limited Assurance
 - Joseph Hood Primary School- Final- Reasonable
 - Poplar Primary School- Final— Reasonable
 - Hatfeild Draft Reasonable
 - St Thomas of Canterbury- Draft Reasonable
 - Priory Draft Reasonable

Limited Assurance reviews

- 2.16 Since April 2023, we have issued 5 final limited assurance reports: Direct Payments (adults), St Matthews Primary and Nursery School, Sharepoint permissions, School budget monitoring and Financial Assessments.
- 2.17 Direct Payments (adults)- All actions implemented.

Issues: Access levels on the All pay system require review. Mosaic does not accurately reflect the various ways in which service users receive and manage their direct payments. Various Spreadsheet records are maintained by the team which are not reconciled to the Mosaic system. Audit found four accounts on Mosiac not on the Monitoring team's record of all current service use. Sample testing shows delays in returning surplus funds from AllPay. Complaints received not recorded or reviewed.

Management Actions: The recommendations have all been completed: Regarding the recommendation for balances to be recouped to the Council, to close an account, the funds must be recouped back to the council leaving the account with a nil balance. The ASC Team is responsible for ensuring the

profile for the relative who is managing the direct payment on behalf of the customer is set up on Mosiac and where this does not occur, the DP Team ask the social worker retrospectively to add the relative's profile. Card Status Report detailing actions to be taken for 4 inactive accounts. The running of the inactivated reports was reviewed and will be run on a Quarterly basis, if cards that are not required are identified, funds to be recouped to the Council and the account closed.

2.18 St Matthews Primary and Nursery School (all actions implemented)

Issues: The school produced a predicted deficit budget for the 2022/23 financial year of £59,811. The 1-year budget plan was submitted to the Local Authority on 11/05/2022; however, this was not a signed version as approved by the Governors. The Local Authority did not licence the 2022/23 deficit budget. The school does not have a Statement of Roles and Responsibilities, Financial Terms of Reference, and Scheme of Delegation in place. A review of a sample of high-value purchases carried out by the school found, no quotes obtained and no contract in place.

Management Action: Meetings have been held with LBM and the school will produce and have approved by Governors: - a 3-Year Budget, Recovery Plan and a 1-Year Budget Cash Flow, in addition to a 1-year deficit budget for 2023/24. A Statement of Roles and Responsibilities, Financial Terms of Reference and Scheme of Delegation will be taken to the Governors for approval and regularly reviewed. Contract put in place and a review of all ongoing contracts undertaken to ensure value for money is achieved. A BACS process and procedures manual including approved BACS signatories and payment limits detailed in the document.

2.19 SharePoint permissions (priority 1 action complete)

Issues: Sensitive files had been saved in Public Folders (Internal staff only – not external). SharePoint records were found to be out of date. Membership of each group team site is not currently visible on the site. Audit testing found sites with staff access recorded as still in place for leavers and movers. The role of the Business Champion should be clarified, with responsibilities made clear. Local SharePoint User Policy/procedure guidance relating to the sharing of documents is not available. SharePoint training should be reviewed, to ensure it meets the needs of the organisation and is fit for purpose.

Management Action: HR reminded managers of their responsibility to complete a starter, mover, leaver form for all leavers, including agency workers. The sensitive documents saved in public folders have been removed.

2.20 School budget monitoring (1 P1 actions outstanding)

Issues: The LBM Scheme for Financing Schools has not been updated since 2018. 30% of LA maintained schools were found to have been closed on an unlicenced deficit balance. Deficit meetings and recovery plan meetings are not being held on a timely basis and minutes are not retained to evidence discussions and meeting outcomes. The monitoring and escalation of non-submission of financial returns was not evident. The requirement for schools in deficit to provide

additional monthly monitoring returns is not evident. No formal process has been established of the administration of cash advances, and no repayment plan enforced. Audit testing identified some schools have not fixed their approved budgets on their finance system (FMS)

Management Action: Scheme scheduled to be updated in March 2024 with review of narrative in section C re the cash advances to schools to ensure it's written in line with regulation. The volume of schools with a deficit budget is roughly twice that of previous years and the process has resultingly been slightly slower than usual. All schools with a deficit budget have been contacted, meetings with finance and the AD of Education and mitigation measures discussed. Schoos in deficit have now received a licensed deficit. The scale of the issues this year necessitated a review of the existing processes. New more formalised quarterly monitoring will provide further formal evidence.

2.21 Financial Assessments (3 P1 actions in progress)

Issues: There was a backlog of financial assessments waiting to be reviewed and processed, with no targets set for turnaround times. The charges passed on to customers were found to be out of date and had not been reviewed since 2012. Clients who have entered into a deferred payment agreement with the authority are not receiving regular statements advising of the level of debt as required by the Care Act. Customer concerns raised locally are not recorded and therefore not used to assist with service improvements, or lessons learned reviews. Although reports are available from Mosaic, IT have informed internal audit that the system could be better used to assist with reporting and completion of work, such as Deferred Payment statements.

Management Action: The charges to clients for care provided at home will be reviewed and updated to reflect the actual costs to the authority. The Deferred Charge Mosaic report will be reviewed with appropriate action taken. The team will ensure that going forward, a deferred charge is correctly recorded on Mosaic. Reassessments requiring a review will be carried out as soon as possible. A process will be put in place locally to ensure that informal complaints received direct by the service area are addressed appropriately and quickly resolved. Consideration will be given to recording informal complaints received, together with the time taken to both respond and resolve as well as detailing the outcome of the concern raised.

Progress of Priority 1 audit actions

2.22 We currently have 9 Priority 1 actions outstanding; 2 actions are for audits completed prior to 2023/24 and 7 actions for final reports issued since April 2023. An update on progress of all outstanding Priority 1 actions is included in Appendix B.

Final Assurance reports issued in 2023/24, with outstanding Priority 1 audit actions.

Audit	Final Report Date	Number of Priority 1 recommendatio ns	Actions outstanding
Direct Payments	23/5/23	2	0
St Matthews School	4/7/23	3	0
Sharepoint permissions	25/7/23	2	0
Regulatory Service Governance (reasonable assurance)	29/8/23	2	2
School budget monitoring	6/9/23	5	1
Financial Assessments	18/11/23	3	3
Poplar Primary (reasonable assurance)	30/10/23	1	1
Total P1's		18	7

Final Assurance reports issued prior to 2023/24, with outstanding Priority 1 audit actions.

Audit	Final report date	Number of Priority 1 recommendat ions	No of P1's outstanding		
Transport Fleet Management	20/12/21	1	1		
Planning Enforcement	23/3/23	4	1		
Total P1's		5	2		

4 <u>Counter-Fraud and Investigations</u>

- 4.1 The responsibility for managing the risk of fraud and its prevention and detection lies with management. However, Internal Audit's planned work includes evaluating controls for their effectiveness in mitigating the risk of fraud.
- 4.2 Counter-fraud work has been undertaken by the South West London Fraud Partnership (SWLFP) since April 2015. This falls across three categories, namely:
 - Reactive investigations arising from external intelligence, management referrals or whistleblowing disclosures.
 - Co-ordination and investigation work in line with the requirements of the National Fraud Initiative data matching exercise
 - Proactive counter-fraud work which includes data matching and online fraud awareness training.
- 4.3 A separate report is provided twice yearly by the SWLFP detailing the cases referred and the outcome of any investigations.

- 4.4 Any allegations of corporate fraud or corruption are brought to the attention of the Head of Internal Audit in the first instance. Whistleblowing concerns are also recorded by Internal Audit and the outcome reported annually to the Committee.
- 4.5 Any areas of potential internal control weaknesses identified during fraud investigations are considered for inclusion in the internal audit plan.
- 5 Alternative options
- 5.1 None for the purposes of this report.
- 6 Consultation undertaken or proposed
- 6.1 n/a
- 7 Timetable
- 7.1. None for the purposes of this report.
- 8 Financial, resource and property implications
- 8.1 The Council's budget includes provision for the audit plan.
- 9 Legal and statutory implications
- 9.1 This report sets out a framework for Internal Audit to provide a summary of internal audit work for 2023/2024. The Local Government Act 1972 and subsequent legislation sets out a duty for Merton and other Councils to make arrangements for the proper administration of their financial affairs. This report also complies with the requirement of the following:
 - Local Government Act 1972
 - Accounts and Audit Regulations 2015
 - CIPFA/IIA: Public Sector Internal Audit Standards (PSIAS)
 - CIPFA/IIA: Local Government Application Note for the UK PSIAS

The provision of an Internal Audit service is integral to the financial management at Merton and assists in the discharge of the Council's duties.

- 10. Human rights, equalities and community cohesion implications
- 10.1 n/a
- 11 Crime and disorder implications
- 11.1 n/a
- 12 Risk management and health and safety implications
- 12.1 n/a

APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

Appendix A – Audit Assurances since April 2023

Appendix B- Update on all outstanding Priority 1 actions



Audit Assurance Opinions: 2023/24

AUDIT TITLE		Department	FINAL DATE		ASSURA	NCE LEVEL		REC	OMMENDAT	IONS
				SUBSTANTIAL	reasonable	LIMITED	ON	Priority 1	Priority 2	Priority 3
	Final/completed reviews						'		•	
1	Core Infrastructure and Legacy Application Review	F&D	20/4/23		Y				4	
2	Section 17 payments	CLLF	19/5/23		Y				8	
3	Shared Pension Service	F&D	9/5/23		Y					1
4	Business Rates	F&D	19/5/23		Υ				4	
5	Direct Payments (adults)	ASC,IC&PH	23/5/23			Y		2	12	1
6	Licensing fees and Charges	ECPC	11/6/23		Υ				9	
7	Recruitment and Pre employment checks	I&C	29/6/23		Y				2	2
8	St Matthews Primary and Nursery School	CLLF	4/7/23			Y		3	14	1
9	Sharepoint permissions	I&C	25/7/23			Y		2	6	
10	Merton and Sutton Joint Cemetery Board accounts	F&D	9/6/23		Y					
11	Regulatory Service Governance review	ECPC	29/8/23		Y			2	9	2
12	School budget monitoring	F&D	6/9/23			Y		5	6	
13	Accounts Receivable	F&D	6/9/23	Y					2	1

14	Climate Change	ECPC	12/10/23	Y			2	
15	Council Tax	F&D	17/10/23	Y			2	
16	Joseph Hood Primary school	CLLF	18/10/23	Y			7	3
17	IT Asset Management	F&D	29/8/23	Y			1	2
18	Mayors accounts	F&D	14/11/23	Y				
19	Poplar Primary School	CLLF	16/11/23	Y		1	11	1
20	Watersports Centre	ECPC	20/12/23	Y			5	1
21	Cash and Bank – Direct Debits	F&D	4/1/24	Y			4	1
22	Financial Assessments	ASC,IC&PH	23/1/24		Y	3	13	3
23	Accounts Payable	F&D	17/1/23	Y			3	
24	Care Act assessments	ASC,IC&PH	1/2/24	Y			6	
25	Household Support grants	I&C	6/2/24	Y			2	
	Draft							
26	St Thomas of Canterbury School	CLLF	3/1/24	Y		1	12	3
27	Pension/Payroll controls	F&D	8/2/24		Y	3	5	
28	Priory School	CLLF	17/1/24	Y		1	11	1
29	Arbiocultural contract	ECPC	14/2/24	Y			4	4
30	Hatfield Primary school	CLLF	14/2/24	Y			8	
	Audits in progress							
31	Grants to Voluntary groups	I&C						
32	Ukraine support	ASC,IC&PH						

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33	Homelessness and Temporary accommodation	S&D				
34	Budget Monitoring	F&D				
35	Treasury Management	F&D				
36	Procurement cards	F&D				
37	Information Governance	I&C				

TOTALS		1 (3%)	23 (77%)	6 (20%)	0 (0%)	23 (10%)	172 (78%)	27 (12%)
			(1170)			,		

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Update on all outstanding Priority 1 audit actions

Appendix B

1 Planning Enforcement Final Report 23/3/23 (1 P1 action outstanding)

Agreed Action	Management Response-	Target date
The Local Enforcement Plan should be finalised and approved by Head of Development Management &	We have drafted a formal enforcement plan; this is yet to be ratified by cabinet and councillors.	31/3/24
Building Control as soon as possible and thereafter approved by Cabinet.	25/1/24 confirmed action still WIP and target date remain the same	

2 Transport Fleet Management Final report 20/12/21 (1 P1 action outstanding)

Agreed Actions	Management Response	Target date
LBM does not currently have a formal Fleet Management Strategy. A formal Fleet Management Strategy should be developed to identify LBM's fleet requirements both currently and in the future. Once a formal strategy has been developed, management should monitor performance in delivering the actions contained within the strategy, and against agreed performance management standards.	Updated comment October 2023. The service is currently drafting a strategy (project initiated) for the review of fleet and vehicle options with assistance of an external expertise, focusing on how to transition to and deliver fleet requirements and a decarbonised vehicle solution to meet service demands. Time scale for completion is December 2023. Additionally, the current service and maintenance requirements shall continue to 2025, but the service has reviewed and drafted a comprehensive and new specification for the future service provider in the management of the Council's workshop, providing a range of solutions from regular maintenance to vehicle procurement. Implementation is April 2025.	31/12/23

3. Regulatory Services – Final Report 29/8/23 (2 P1 actions outstanding)

Agreed Action	Management Response	Target date
The Collaboration Agreement should be finalised and agreed with the final version reflecting the current practices and processes in place for the tri-borough Shared Regulatory Service	October 2023 - The CA is now complete but requires sign-off. We are currently seeking advice on the correct route for this. 06/02/24 - We have received legal advice on the correct route for sign-off. Committee reports are being compiled for the next round of committees, expected June/July.	22/4/24
The RSP Scheme of Management should be reviewed and updated to include the tri-borough borough management arrangements. As the Scheme of Management works alongside the Collaboration Agreement, the review of the scheme should be undertaken and agreed in line with the RSP Collaboration Agreement	06/02/24 - Work on these two items has begun but will require legal advice and detailed work. We propose an extension of the deadline to May 2024 to allow sufficient time for this work to be completed.	2/5/24

4. School Budget Monitoring Final Report 7/9/23 (1 P1 actions outstanding)

Agreed Action	Management Response	Target date
The LBM Scheme for Financing Schools requires updating in line with the DFE guidance and updates provided since 2018. The 'Guidance on setting a Deficit budget' requires updating to remove Section C, as cashflow loans are not permitted under the DFE guidelines.	Updated comments: 12/02/2024: Scheme scheduled to be updated in March 2024 with review of narrative in section C re the cash advances to schools to ensure it's written in line with regulation.	31/3/24

5. Financial Assessments 13 January 2024 (3 P1 actions outstanding)

Agreed Actions	Management Response	
A comparison between the FC2A and the on-line form should be carried out as soon as possible to ensure consistency between the two documents. All clients who have completed an on-line application form should be contacted with a view to requiring them to complete and sign a gifts declaration as soon as possible.	Assessment Team	
The charges to clients for care provided at home should be reviewed and updated to reflect the actual costs to the authority, as soon as possible. Where permissible, any costs included in administering the service should also be added. FA Manager with assistance Sue Robertson FA Manager with assistance Sue Robertson		31/7/24
The Deferred Charge Mosaic report should be reviewed as soon as possible with appropriate action taken.	Currently there is a working group for finance related Mosaic improvements and other Mosaic changes –	31/7/24
The team should ensure that going forward, a deferred charge is correctly recorded on Mosaic	The FA Manager is a member of this group.	

6. Poplar Primary School 16 November 2023 (1 action outstanding)

Agreed Actions	Management Response	Target date
The school should continue to liaise with the Schools	24/1/24 update- Following a review of school deficit	
Finance Team at the LA to obtain a license for the deficit	budgets greater the £100k the Executive Director of	31/3/24-
budget. Once a license is obtained the budget must be		for recovery
fixed on SIMS FMS to support effective forecasting and	' '	plan
budget monitoring.	£212,000 for the financial year 2023/24.	P.S
	As part of the monitoring the school will provide	
The school must produce and have approved by		
Governors: - a Recovery Plan and a 1-Year Budget	l · · · · · · · · · · · · · · · · · · ·	
Cash Flow to supplement the current 1-year deficit	·	
budget submitted for 2023/24.	Also, as set out in the national regulations, and scheme	
	of delegation, the school will create a recovery plan	
	which will return the budget to a balance within three	
	years.	

Committee: Standards and General Purposes

Date: 5 March 2024

Wards:All

Subject: Internal Audit Plan, Strategy and Charter 2024/25

Lead officer: Asad Mushtaq Director of Finance and Digital

Lead member: Martin Whelton, Chair of the Standards and General Purposes

Committee

Forward Plan reference number: N/A

Contact officer: Margaret Culleton, Head of Internal Audit

Email: margaret.culleton@merton.gov.uk

Recommendation:

Members review and comment upon the 2024/25 Draft Internal Audit Plan, Strategy and Charter.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1. The Public Sector Internal Audit Standards (PSIAS) requires the Head of Audit to prepare a risk-based audit plan designed to implement the audit strategy. The Standards and General Purposes Committee has, amongst other things, responsibility for the "review of internal audit plans, charter and strategy" This report has been provided to assist the Committee in meeting its responsibilities.

2 **DETAILS**

- 2.1 Internal Audit is an assurance function that provides an independent and objective opinion to the organisation on the control environment, by evaluating its effectiveness in achieving the organisation's objectives. It objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources. The work undertaken by Internal Audit is a key part of the Council's Annual Governance Statement (AGS) process and the annual audit opinion forms part of the AGS.
- 2.2 The Accounts and Audit (England) Regulations 2015 require that" A relevant body must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes taking into account public sector Internal audit standards and guidance". Proper practice is defined as being the Public Sector Internal Audit Standards (PSIAS) together with an Application Note published by the Chartered Institute of Public Finance & Accountancy (CIPFA). The PSIA standards came into effect from 1st April

- 2013, were last updated in March 2017 and apply to local and central government, and the NHS.
- 2.3 Internal Audit is required to complete an internal self-assessment against the standards on an annual basis and an external review to be undertaken every 5 years. An external review was undertaken during 2023/24 and found that the service is compliant with the standards.

Internal Audit Plan 2024/25

- 2.4 In preparing the audit plan, the PSIAS standards require the Head of Audit to take account of the adequacy and outcomes of the organisation's risk management, performance management and other assurance processes. Where the outputs from these processes are not judged to be sufficiently reliable, the Head of Audit should undertake their own risk assessment. The Head of Audit should consult stakeholders on the draft plan and revise the plan if appropriate. Internal Audit met with all Assistant Directors in 2023/24 and attended DMT's to discuss the areas of high risk and the audits plan proposed for 2024/25.
- 2.5 To ensure sufficient coverage is delivered across the organisation, Internal Audit combined the corporate assessment of risk with its own assessment of risk (the Audit Universe) and knowledge of any emerging risks to produce a plan with sufficient coverage of the Council's activities. This enables the Head of Audit to provide the Council with an opinion on the adequacy and effectiveness of the internal control environment.
- 2.6 As always, the audit plan must remain flexible to accommodate changing management and organisational priorities during the year and officers from Internal Audit will attend DMTs throughout the year to agree which audits should be prioritised each quarter and whether new areas need to be added and / or areas removed or postponed. A contingency has been included in the plan to enable the officers to be flexible and respond to changes that the council will undergo during the 2024/25 year.
- 2.7 In addition, sufficient flexibility is required on an on-going basis to ensure that appropriate levels of audit staff are available for deployment on unprogrammed work with the minimum disruption to the achievement of planned targets.

Assurance Levels

Levels of Assurance	
Substantial Assurance	A sound system of governance, risk management and control exist, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.

Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control are inadequate to effectively manage risks to the achievement of objectives in the area audited.

Priority of recommendations	
1	Major issues that we consider need to be brought to the attention of senior management and should be implemented within 3 months.
2	Important issues which should be addressed by management in their areas of responsibility to avoid exposure to significant risk and should be implemented within 6 months.
3	Minor issues where the risk is low. Action is advised to enhance control or improve operational efficiency

INTERNAL AUDIT CHARTER AND STRATEGY

- 2.8 Internal Audit Standards, state that "The purpose, authority and responsibility of Internal Audit must be formally defined in an internal audit charter, consistent with the Definition of Internal Audit, the Code of Ethics and the Standards. The chief audit executive (Head of Audit) must periodically review the internal audit charter and present it to senior management and the board for approval". The charter should: -
 - define internal audit's purpose, authority and responsibility.
 - establish internal audit's position within the organisation, including the nature of the chief internal audit executive's functional relationship with the board (committee);
 - authorise access to records, personnel and physical properties relevant to the performance of engagements.
 - define the scope of internal audit activities.
 - define the terms "board" and "senior management";
 - cover the arrangements for appropriate resourcing.
 - define the role of internal audit in any fraud-related work; and
 - include arrangements for avoiding conflicts of interest if internal audit undertakes non-audit activities.
- 2.10 The Strategy sets out how the Council's Internal Audit Service will be developed and delivered in accordance with the Internal Audit Charter. The Head of Audit reviews the Strategy and Audit Plan on an annual basis. The Strategy communicates the contribution that Internal Audit makes to the organisation and includes: -

- (a) Internal Audit objectives and outcomes.
- (b) how the Head of Audit will form and evidence their opinion on the control environment to support the Annual Governance Statement.
- (c) how Internal Audit's work will identify and address significant local and national issues and risks.
- (d) how the services will be provided, i.e., internally, externally or a mix of the two: and
- (e) the resources and skills required to deliver the Strategy.

3 ALTERNATIVE OPTIONS

3.1. None for the purpose of this report.

4 CONSULTATION UNDERTAKEN OR PROPOSED

4.1. The draft Audit Plan has been sent to all Chief Officers who have consulted with their management teams. The Head of Audit attends Departmental Management teams to discuss the audit coverage.

5 TIMETABLE

5.1. The Internal Audit Plan will be the basis of Internal Audit's programme of work throughout the 2024/25 financial year. The timing of individual audits is considered in consultation with the Departments where possible.

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

6.1. The audit plan is completed within the provision of existing resources.

7 LEGAL AND STATUTORY IMPLICATIONS

- 7.1. The requirement to maintain an Internal Audit service is defined within legislation, some of which is outlined below:
 - a) Section 151 of the **Local Government Act 1972** requires each Local Authority to make arrangements for the proper administration of their financial affairs and to ensure that one of their officers is made responsible for the administration of those affairs.
 - b) The Accounts and Audit Regulations 2015
 3 (a) A relevant authority must ensure that it has a sound system of internal control which facilitates the effective exercise of its functions and the achievement of its aims and objectives; (b) ensures that the
 - financial and operational management of the authority is effective; and (c) includes effective arrangements for the management of risk.
 - 5 (1) A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and

governance processes, taking into account public sector internal auditing standards or guidance.

- 7.2. The Director of Finance and Digital is the designated officer responsible for ensuring compliance with these pieces of legislation. The purpose of the Internal Audit Plan, Strategy and Charter is to:
 - a) Provide Elected Members with an assurance as to the adequacy of the Authority's financial systems and system of internal audit.
 - b) Provide Chief Officers with assurance that the financial dealings within their departments meet the standard required.

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

8.1. Effective and timely auditing and advice enables Departments, Voluntary Organisations and Schools to provide quality services to their clients. These client groups are often vulnerable members of the community, e.g., elderly people, disabled people, asylum seekers and members of staff and voluntary organisations. The audit service helps to identify weak financial management and sometimes reflects weaknesses in other operational systems such as quality and monitoring. Audit, therefore, has a crucial role in ensuring that Council resources are used to enable a fair access to quality services.

9 CRIME AND DISORDER IMPLICATIONS

9.1. There are no specific crime and disorder implications arising from this report.

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

- 10.1. The Audit Plan has a risk assessment formula built into the processing. This takes such aspects as expenditure, income, and previous audit findings into account and calculates the priority and the frequency of the audit.
- 10.2. In addition to the audit risk assessment formula the Corporate Risk Register is consulted during the production of the Draft Plan.

11. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

Appendix 1 - Merton's Draft Internal Audit Plan, Strategy and Charter 2024/25

12 BACKGROUND PAPERS

12.1. Papers held within the Internal Audit Service.

INTERNAL AUDIT PLAN, STRATEGY AND CHARTER 2024/25



Introduction

This document sets out the Council's Internal Audit Plan, Strategy and Charter for the year 2024/25.

The purpose of the Internal Audit Plan, Strategy and Charter is to:

- Ensure effective audit coverage and a mechanism to provide independent and objective overall assurance to Members, the Director of Finance and Digital and the Corporate Management Team (CMT).
- Optimise the use of audit resources available, given that they are limited.
- Add value and support senior management in providing effective control and identifying opportunities for improving value for money.
- Deliver an internal audit service that meets the requirements of the Accounts & Audit Regulations 2015.

Internal Audit's Role in the Risk, Internal Control and Assurance Framework

The Accounts and Audit Regulation 2015 requires an annual review of the effectiveness of the system of internal control to be reported to the Standards and General Purposes committee for consideration. The system of internal control is broader than just the work of the internal audit section and includes the framework of assurance covering how the risks to the authority are identified with effectively managed controls. Assurances are provided by a range of internal and external providers. The Head of Internal Audit will assess whether the overall framework of assurances is adequately designed and effectively operated through a plan of internal audit work.

In addition to the above, the Director of Finance and Digital has a statutory duty under Section 151 of the Local Government Act 1972, to establish a clear framework for the proper administration of the local authority's affairs. To perform that duty the Section 151 Officer relies on, amongst other things, the work of internal audit for reviewing systems of internal control, financial management and other assurance processes.

The standards for 'proper practice' in relation to internal audit are laid down in the Public Sector Internal Audit Standards. We continually ensure compliance with these professional standards these are reflected in our Charter attached.

An overall assurance on the adequacy of internal controls within the Council is provided in the Annual Report and the Annual Governance Statement.

To give such an assurance, a balanced programme of Internal Audit reviews is constructed each year. This Audit Plan contains elements of all audit work assessed by a "Risk Based" approach. There are many elements to this including undertaking systems reviews, regularity audits (e.g., schools), contract and computer audit, and an Annual Review of major financial systems such as Council Tax, the General Ledger and debtors/creditors systems.

To contribute to the Annual Governance Statement all Internal Audit reports give an audit assurance as follows:

- Substantial Assurance
- Reasonable
- Limited Assurance
- No assurance

In addition, each recommendation is given a priority 1 (high), 2 (medium) or 3 (low). All recommendations are followed up by Internal Audit to ensure that they have been implemented.

Anti-Fraud and Corruption

The Internal Audit service will review areas of high fraud risk to recommend improvements in controls.

Related Documents

This document is one of a series that, together, constitute the policies of the Authority in relation to anti-fraud and corruption. The other documents are:

- Anti-Fraud and Corruption Strategy
- Anti-Money Laundering Policy
- Whistleblowing policy

Internal Audit's Role Providing Advice

Internal Audit can provide support and advice to managers, particularly regarding the interpretation and application of Council Policies and Procedures.

Internal Audit advice and recommendations are given without prejudice to the right of Internal Audit to review the relevant policies, procedures, and operations at a later date.

We provide advice, support, and training to schools. We provide a newsletter to schools and share best practice.

Protocol for Audit Reviews

For each audit review carried out, the responsible Head of Service/Assistant Director will be consulted in the scoping to ensure that the audit is appropriately focused on current key perceived risks and issues. A term of reference (Audit Brief) will be produced for each audit review and agreed to ensure the scope, objectives, approach, and timetable are understood and agreed.

Draft internal audit reports will be issued for discussion with the appropriate levels of management which are normally set out in the terms of reference.

Final internal audit reports will be issued after the agreement of draft reports and contain completed management actions plans that will identify those responsible for implementation and timescales. The final reports will always be issued to the 'Lead

Client' responsible for the area reviewed.

Implementation of Agreed Audit Recommendations

At the end of each audit review, an audit report will be produced containing agreed management actions to audit recommendations made. We will ensure these agreed actions to audit recommendations are fully implemented to ensure improvements to the Council's control environment and value for money. We will follow-up on all audit recommendations. We will get confirmation from officers responsible for implementation that required actions have taken place.

Developing the Annual Audit Plan 2024/25

A key focus of the Audit Plan for 2024/25 is to provide assurance on the core processes. In setting the plan, discussions take place with a range of officers including Directors and Assistant Directors, to identify key risk areas, as well as reviewing the Council's risk registers and using professional knowledge of changes or potential areas of risk.

Further significant changes in processes and policies are likely during the coming year due to legislative changes. Internal audit will continue to support this work and provide advice on the governance, risk management and control implications of the changes as well as undertaking audit reviews.

The Standard and General Purposes Committee will be kept informed of progress against the Annual Audit Plan and be asked to agree any significant changes during the year.

Lines of Defence

There are three lines of defence in place on controls in the Council.

- 1st line of defence is the day-to-day operational controls.
- 2nd line of defence is functions (such as finance, HR and Procurement).
- 3rd third line of defence is independent inspection such as Internal Audit or other assurance providers.

Internal Audit audits will look to ensure that managers in the 1st and 2nd line defence have sound controls and monitoring in place and that their management function is properly discharged. Given the limitations on internal audit resources there is an increasing need for more reliance to be place by the Councils 2nd line of defence and audit will increasingly need to provide assurance on the effectiveness of those functions especially as budget constraints impact on these areas.

Annual Audit Plan 2024/25

Appendix A shows the detailed Annual Audit Plan and provides a summary of each review.

Contingency has been provided for unplanned reactive work. This will be used to respond to emerging issues, risks and to have the capacity to respond to requests from

senior managers. The timing of the audit review will be agreed with management during the planning process. There is however flexibility to respond, for example to pressures on services audited and audit resource availability.

In addition to the Standards and General Purposes Committee receiving regular progress reports against the plan. The Head of Internal Audit will also attend Management Team meetings as required, to discuss audit coverage and outcomes.

Internal Audit Plan 2024/25

Environment, Civic Pride and Climate

Audits	Comments / Key risks / Focus			
Highway contracts	Review of the contract monitoring arrangements and compliance with a focus on maintenance and repairs.			
Building Safety repairs	Review of safety repairs and statutory compliance - g- safety, legionella, asbestos, and check in terms of processes and assurance re meeting statutory requirements for Council owned buildings.			
Air Quality Control	Review of the function and arrangement in place with funding – co-ordinated through Merton for 30 other London Boroughs.			
Capital Projects	Review of the programme management arrangements in place for a sample of capital projects.			
Environment enforcement	Review of the arrangements for managing the contract.			
Food Inspections	Review progress against backlog, data quality and quality of systems in place.			

Housing and Sustainable Development

Audits	Comments/key risks/focus		
	To review the recently launched licencing scheme for landlords and introduction of houses in multiple occupation HMO.		

Adult Social Care, Integrated Care and Public Health

Audits	Comments / Key risks / Focus
Adult social care debt management	Review of arrangements in place to recover social care debt and management oversight- joint audit with Finance. To include Mosaic to E5 communication and reconciliations.
Home Care Contracts	Review of monitoring arrangements in place for Home Care contracts- scope to be discussed and agreed.
Deprivation of Liberty assessments	Review of arrangements in place for Deprivation of Liberty to ensure compliance with legislation.
Transition from Children to Adults	Review of the transition process from children to adults, to include adult outcomes. identifying young people requiring support (including those with medical needslink to NHS) plan, timeliness, assessment, resource planning, progress and good oversight.
Sexual Health Contract	Review of new contract (due to go live in October) commissioned jointly with Health (Public Health Grant). To review charges and out of borough service recharges

	(commissioned by Richmond and Wandsworth who can out the service on behalf of LBM and CLCH).			
	Review of administration of scheme. Monitoring of			
Client Financial Affairs	arrangements in place to manage client assets.			

Children Lifelong Learning and Families

Audits	Comments / Key risks / Focus
High-Cost Social Care Placements	Review the commissioning arrangements for the children social care placements (to include registered and unregistered). The audit to cover the initial agreement with the placement, how the care plan is monitored.
Housing Benefit for Care Leavers	Housing Benefit for Care Leavers in accommodation provided via Local authority. To ensure a process is in place to check and track they are in receipt of the correct payments.
	Review of monitoring arrangements for contract and ensure contract requirements are met.
Schools PFI contract	Review of the arrangements in place, for expiry contract management. Handover risk and opportunity assessment undertaken covering for example, contract conditions, assets, future provision.
Schools' assurance audits	To review governance, and financial management arrangements including contracts for a sample of schools.

Finance and Digital

Audits	Comments / Key risks / Focus			
Budget Setting	To review the arrangements for budget setting approval and oversight.			
Corporate Procurement	A review of the procurement process and sample testing on expenditure to ensure compliance with Contract Standing Orders. Sample checking across departments, to include procurement planning.			
Capital Programme	Review of the governance arrangement and monitoring of the capital programme.			
Cash and Bank	Review of the controls in place in the cash and bank process.			
IT Disaster recovery and Business Continuity	To review the adequacy and effectiveness of the key controls in operation for IT Business Continuity and Disaster Recovery to minimise related risks IT data, services and system availability within the Council.			
Accounts Payable -Duplicate Payment Testing -quarterly review	Quarterly payment data checks to identify any duplicate payments made. Queries checked by Transactional services.			

Innovation and Change

Audits	Comments / Key risks / Focus		
Control and monitoring of Agency staff	Review of the arrangements in place for the process for appointing agency staff, checking and sign off on timesheets and management oversight. (To include IR35 checks).		
	Key Financial System (Joint audit across Sutton, Merton and Kingston).		
	Review of process for collection data for published data, statutory returns and corporate reports		
	Review of controls in place for issue and storage of certificates and financial arrangements.		

Grants/Annual Accounts

Audits	Comments / Key risks / Focus			
Merton and Sutton Joint Cemetery Board	Review of annual accounts.			
Mayor's account	Annual audit and sign off			
Supporting Families grant	Quarterly sample check on grant claims and on-going support and advice.			
Annual Governance Statement	Annual review of the Councils governance arrangements			
Follow ups	Follow up on audit actions to ensure timely implementation.			

Charter and Strategy 2024-25

This Charter and Strategy sets out the purpose, authority, and responsibility of the Council's Internal Audit function, in accordance with the UK Public Sector Internal Audit Standards. It also sets out how the South West London Audit Partnership (SWLAP) will be developed and delivered in accordance with these standards.

Public Sector Internal Audit Standards

The UK Public Sector Internal Audit Standards (PSIAS), which came into effect from 1 April 2013, and were revised in April 2017, provide a consolidated approach across the whole of the public sector providing continuity, sound corporate governance and transparency.

The PSIAS are mandatory, and the Heads of Audit will report on compliance with the Standards as part of their Annual Internal Audit Report. An independent external quality assessment (EQA) review of SWLAP compliance with the Standards will be undertaken at least every five years, as required by the PSIAS, and will be supplemented by an annual self-assessment to ensure the SWLAP ongoing compliance with them.

Standard 1000 requires that the purpose, authority and responsibility of the internal audit activity must be formally defined in an internal audit charter. This Charter will be reviewed on a regular basis and presented to the relevant audit committee for review and approval.

PURPOSE

Internal Audit is defined by the Institute of Internal Auditors' International Professional Practices Framework as "an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes".

In a local authority, internal audit provides independent and objective assurance to the organisation, its members, the senior management board (Directors Board in Wandsworth and Richmond's Shared Staffing Arrangement (SSA), Strategic Leadership Team at Kingston, Corporate Management Teams at Merton and Sutton), and in particular the Directors of Finance to help them discharge their responsibilities under s151 of the Local Government Act 1972, relating to the proper administration of the Council's financial affairs. For Achieving for Children (AfC), internal audit provides assurance to its Strategic Leadership Team and Audit and Risk Committee.

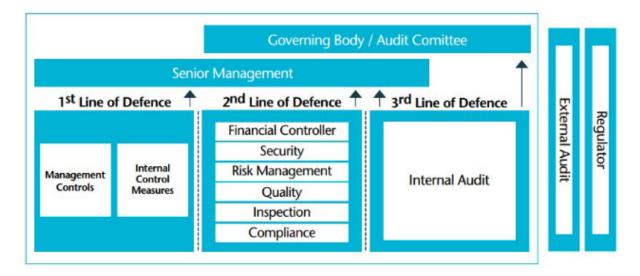
In addition, the Accounts and Audit Regulations 2015, Regulation 6 (1), requires that:

"'A relevant body must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes taking into account public sector Internal audit standards and guidance". Internal Audit proper practices is defined as compliance with the Public Sector Internal Audit Standards and the CIPFA application note.

Within an organisation, there are 3 lines of defence in place to effect controls. The first line of defence is the day to day operational controls, the second is the management controls (budget & performance monitoring, trend analysis) and the third is independent inspection, both internal & external.

Internal audit forms part of the third line of defence and provides assurance on the effectiveness of governance arrangements, risk management and internal controls, and this includes an

assessment of the effectiveness of the first two lines of defence. Internal audit can place reliance on assurances provided by third parties, although depending on the source, this may require some independent validation.



(source: CIIA)

Mission and Core Principles

Standard 1010 requires that the mandatory nature of the Core Principles for the Professional Practice of Internal Auditing, the Code of Ethics, the Standards and the Definition of Internal Auditing must be recognised in the internal audit charter. The mandatory elements of the International Professional Practices Framework (IPPF) for Internal Audit are incorporated into the PSIAS and include an overarching 'Mission' for Internal Audit services '...to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight'.

The 'Core Principles' that underpin delivery of the IPPF mission require internal audit functions to:

- Demonstrate integrity.
- Be objective and free from undue influence (independent)
- Align with the strategies, objectives and risks of the organisation.
- Be appropriately positioned and adequately resourced.
- Demonstrate quality and continuous improvement.
- Communicate effectively.
- Provide risk-based assurance.
- Be insightful, proactive, and future-focused; and
- Promote organisational improvement.

AUTHORITY and ACCESS TO RECORDS

In carrying out their duties and responsibilities, Internal Audit shall be entitled to have full and unrestricted access to all of the Council's activities, records, assets, cash, stores, property, personnel and information (both manual or computerised) which they consider to be necessary to properly fulfil its function. Internal audit may enter Council property and has unrestricted access to all locations and officers where necessary on demand and without prior notice. Council staff are expected to provide every possible assistance to facilitate the progress of audits.

Access rights also apply to other third parties / organisations as permitted through contract and partnering arrangements. Internal audit has the authority to obtain such information and explanations as it considers necessary to fulfil its responsibilities.

All records, documentation and information accessed in the course of undertaking internal audit activities shall be used solely for that purpose. All internal audit staff are responsible and accountable for maintaining the confidentiality of the information they receive in the course of their work. Any information shared will be shared in accordance with the Shared Service Data Sharing Protocol.

RESPONSIBILITY

The Audit Committees for each of the partner councils fulfil the functions of 'The Board'; and the Corporate Management Teams for each council will fulfil the functions of 'Senior Management', as defined by PSIAS.

The responsibility for maintaining an adequate and effective system of internal audit within each Council lies with the authority's Chief Finance Officer (S151 Officer).

The Head of Internal Audit ²is required to provide the Council, via the S151 officer and the Audit Committee, with an annual opinion on the adequacy and effectiveness of the internal control system for the whole council. To achieve this, the internal audit function has the following objectives:

- To provide a quality, independent and objective audit service that effectively meets the Council's needs, adds value, improves processes and helps protect public resources.
- To provide assurance that the Council's operations are being conducted in accordance with legislation, and relevant external and internal regulations, policies and procedures.
- To provide assurance that significant risks to the Council's objectives are being managed.
- To support management through the provision of advice and guidance on the overall control environment, and where new systems and / or procedures are implemented.
- To provide independent assurance over the corporate governance arrangements in place across the Council
- To promote an anti-fraud, anti-bribery and anti-corruption culture within the Council to aid the prevention and detection of fraud. The corporate fraud function will be undertaken by the South West London Fraud Partnership (SWLFP) but will be overseen by the Head of Internal Audit (see Counter Fraud below).
- To undertake investigations where there is suspected fraud, bribery and corruption. This function will be undertaken by the SWLFP but will be overseen by the Head of Internal Audit.

These audit responsibilities are exercised with the aim of assisting the Council to deliver services in the most efficient and effective manner possible.

There are inherent limitations in any system of internal control and thus errors or irregularities may occur and not be detected by internal audit's work. When carrying out its work, internal audit will provide management with comments and report on breakdowns, failures or weaknesses of internal control systems together with recommendations for remedial action. However, internal audit cannot absolve line management of responsibility for internal controls.

Where appropriate, internal audit will undertake audit or consulting work for the benefit of the Council and / or organisations that are wholly owned by the Council (such as Achieving for Children). Where services are provided to bodies separate from the Council, this will be subject to approval by the Shared Service Board and will be provided under the terms of a Service Level Agreement (SLA).

Internal audit may also provide assurance to the Council on third party operations where this is provided for as part of the agreement or contract.

The Heads of Audit considers relying on the work of other internal or external assurance and consulting service providers when forming their annual opinion.

Counter Fraud

Internal Audit's planned work includes evaluating controls for their effectiveness in preventing or detecting fraud. Managing the risk of fraud is the responsibility of management however Internal Audit will consider the risks and exposures which may allow fraud or corruption to occur. Fraud work is undertaken by the South West London Fraud Partnership which is a five Borough Shared Service led by the SSA. This service is overseen by the Shared Service Board which includes the Directors of Finance from each of the partners or their delegated representatives. Work will be undertaken in accordance with an agreed Fraud Plan which includes a mix of proactive and reactive fraud work in the following main areas:

- Housing tenancy
- Internal fraud
- Procurement
- Business Rates
- Council Tax Reduction
- Blue Badge
- Social Care
- Schools

REPORTING

The UK Public Sector Internal Audit Standards require the Head of Internal Audit to report directly to the top of the organisation and those charged with governance. This will be achieved as follows:

- The Audit Charter will be agreed with the senior management team (Directors Board at the SSA, Corporate Management Teams at Sutton and Merton, and Strategic Leadership Team at Kingston)
- The annual audit plan will be compiled by the Head of Internal Audit following discussions with senior managers at their Directorate Management Team (DMT) meetings and sign off by the senior management team (Directors Board at the SSA, Corporate Management Teams at Sutton and Merton, and Strategic Leadership Team at Kingston and AfC). It will then be considered by the Shared Service Board who will agree the number of audit days to be commissioned each year, and the resource required to deliver this. This will then be reported to the Audit Committee for approval.
- The internal audit budget is agreed each year by the Shared Service Board.
- Performance against the annual internal audit plan, together with any significant risk exposures and control issues arising, will be reported to the Shared Service Board on a quarterly basis. Progress reports will be made to Directorate Management Teams on a quarterly basis and to Audit Committee at least twice a year.

- Changes to the plan during the year will be reported to the Shared Service Board quarterly and where significant, to Audit Committee
- Any significant consultancy activity not already included in the risk-based plan, and which might affect the level of assurance work undertaken will be reported to the Audit Committee
- The annual opinion report will be presented to Audit Committee annually.
- Any instances of non-conformance with the Public Sector Internal Audit Standards will be reported to the Shared Service Board and Audit Committee and will be included in the Head of Internal Audit's annual report. Any significant failings will be included in the Annual Governance Statement
- Any external review of the internal audit function will be agreed by, and reported to the Shared Service Board and the Audit Committee

INDEPENDENCE

The Heads of Internal Audit have full and unrestricted access to the following (where relevant):

- The Director of Finance/Resources/Finance and Digital/Corporate and Commercial (S151 officer)
- Chief Executive
- Chair of the Audit Committee
- The Council's Monitoring Officer
- The Council's General Counsel (RBK)
- All members of the senior management team (Directors Board at the SSA, Corporate Management teams at Sutton and Merton, and Strategic Leadership Team at Kingston and AfC)

The Head of the SWLAP performs the statutory role of Head of Internal Audit for RB Kingston, LB Richmond and Afc and is line managed by the Assistant Director of Resources (Financial Services) (SSA), who is responsible for carrying out the Head of the SWLAP's annual appraisal. The Director of Corporate and Commercial and / or the Assistant Director Governance and Law, Kingston can participate in this appraisal review. The standards require that the Chief Executive, SSA, reviews, provides feedback and signs off this appraisal, also that the Chair of the Audit Committee must give feedback.

The Deputy Head of the SWLAP performs the statutory role of Head of Internal Audit for LB Merton and LB Sutton and is line managed by the Head of the SWLAP who is responsible for carrying out the annual appraisal. The Strategic Director of Resources (Sutton), Director of Finance and Digital (Merton), Executive Director Finance and Digital (Merton) and the Chairs of the Audit and Governance Committees (Sutton) and Standards and General Purposes Committee (Merton) can participate in this appraisal review.

The Assistant Director of Resources (Financial Services) performs the statutory Head of Internal Audit role for the LB of Wandsworth and Richmond and is line managed by the Director of Resources who will undertake the annual appraisal, and this will be signed off by the SSA's Chief Executive.

All staff (including agency and contract staff) in the Internal Audit Partnership are required to make annual declarations of any potential conflicts of interest and adhere to confidentiality requirements. As far as resources permit, auditor rotation will be implemented to ensure auditors' objectivity is not impaired.

Internal audit must ensure that it is not involved in the design, installation and operation of controls so as to compromise its independence and objectivity. Internal Audit will however offer advice on the design of new internal controls in accordance with best practice. Where Internal

Audit do provide consultancy services, any audit staff involved in this consulting activity will not be involved in the audit of that area for at least 12 months.

Accountability for the response to the advice and recommendations of Internal Audit lies with management. Managers must either accept and implement the advice and recommendations, or formally reject them accepting responsibility and accountability for doing so.

The Heads of Audit will confirm to the board, at least annually, the organisational independence of the internal audit activity.

Non-audit Areas

The PSIAS require the Internal Audit Charter to identify any 'non-audit' areas that fall under the remit of the Head of Audit as Internal Audit must remain independent of the activities that it audits to enable auditors to make impartial and effective professional judgements and recommendations.

Within the SSA, the Assistant Director of Resources (Financial Services), who covers the Statutory Head of Audit role for Wandsworth, has operational responsibilities for: Health & Safety, Procurement and Pensions and for Risk Management and Insurance.

Since these roles may involve establishing and maintaining the control environment, these functions will be audited independently by Mazars or other such appropriately qualified persons.

The Head of Audit is responsible for preparing the Annual Governance Statement (AGS) in Richmond, Wandsworth, Merton and Sutton. Cipfa recommend that Internal Audit input into the AGS, but that senior management are responsible for the governance arrangements and the preparation of the AGS.

EXTERNAL AUDITORS

Internal Audit will consider all requests from each partner council's external auditors for access to any information, files or working papers obtained or prepared during audit work that has been finalised, which external audit would need to discharge their responsibilities.

DUE PROFESSIONAL CARE

The internal audit function will adhere to / comply with the following:

- Institute of Internal Auditor's International Code of Ethics
- Seven Principles of Public Life (Nolan Principles)
- UK Public Sector Internal Audit Standards
- All Council policies and procedures
- All legislation

All audit work is subject to in house quality control procedures whereby each audit review is subject to senior peer review. The audit service will be subject to an annual self-assessment to assess its compliance with the UK Public Sector Internal Audit Standards and an external review and assessment at least once every 5 years by a suitably qualified, independent assessor. An external review was last completed in 2023. The next review will be completed in 2028.

The Head of Internal Audit is required to hold a relevant professional qualification (CCAB or CMIIA) and be suitably experienced. All staff are required to maintain a programme of

Continuous Professional development (CPD) to ensure auditors maintain and enhance their knowledge, skills and audit competencies.

INTERNAL AUDIT STRATEGY

Internal Audit Objectives

Internal Audit will provide independent and objective assurance to the organisation, its members, senior management and in particular to the Directors of Finance/Resources to support them in discharging their responsibilities under S151 of the Local Government Act 1972, relating to the proper administration of the Council's financial affairs.

It is the Council's intention to provide a best practice, cost efficient internal audit service through the SWLAP which adds value to the partner organisation's it serves.

Internal Audit Remit

The internal audit service is an assurance function that primarily provides an independent and objective opinion on the degree to which the internal control environment supports and promotes the achievement of the Council's objectives. The work undertaken by Internal Audit is a key part of the Council's Annual Governance Statement (AGS) process and the annual audit opinion forms part of the AGS.

Under the direction of a suitably qualified and experienced Head of Internal Audit, Internal Audit will:

- Provide management and Members with an independent, objective assurance and consulting activity designed to add value and improve the Council's operations.
- Assist the Audit Committees to reinforce the importance of effective corporate governance and ensure internal control improvements are delivered.
- Drive organisational change to improve processes and service performance.
- Work with other internal stakeholders and customers to review and recommend improvements to internal control and governance arrangements in accordance with regulatory and statutory requirements.
- Work closely with other assurance providers to share information and provide a value for money assurance service and.
- Participate in local and national bodies and working groups to influence agendas and developments within the profession.

Internal Audit will ensure that it is not involved in the design, installation and operation of controls so as to compromise its independence and objectivity. Internal Audit will however offer advice on the design of new internal controls in accordance with best practice. This type of work is key for our service in ensuring that it works closely with the partner organisations to provide proactive advice and guidance. The ability to bring in knowledge and experience from our other partners is an important way for the service to add value.

Service delivery

The Internal Audit service will be delivered by the South West London Audit Partnership (SWLAP) which is the 5-borough shared internal audit service hosted by the SSA providing internal audit services to LB Wandsworth, LB Richmond, RB Kingston, LB Merton and LB Sutton. This relationship is governed in law through a formal Collaboration Agreement. The arrangement also includes the provision of Internal Audit to Achieving for Children (AfC), the community interest company created by LB Richmond and RB Kingston to provide their children's services.

The SWLAP is an in-house team with contract auditors or agency staff used as required to supplement the in-house skills and experience. The SWLAP are part of the Croydon Framework contract with Mazars and the Cross Council Assurance (CCAS) framework with PWC allowing the service to buy in additional audit resource and expertise. This ensures that the risk of any knowledge gaps (IT) or resource gaps is managed.

The key objective of the shared service is the provision of an efficient and cost-effective service to its partners. This is achieved through the review and standardisation of audit methodology which takes on board best practice, ensuring staff are properly trained and developed, developing and delivering shared audits across more than one partner and reviewing and restructuring the service where needed to drive out cost savings. Key objectives and performance targets are included within the annual Service Plan.

Quarterly performance reports to the Shared Service Board provide updates on any staffing changes, issues such as sickness absence levels and whether there is any surplus or shortfall in resources (significant issues will be reported to the Audit Committee at LB Wandsworth, Audit and Risk Committee at AfC, Audit and Governance Committee at LB Sutton, Audit, Standards and Statutory Accounts Committee at LB Richmond, Standards and General Purposes Committee at LB Merton and Audit, Governance and Standards Committee at RB Kingston).

The statutory Head of Internal Audit roles across the 5 Borough's will be undertaken by the Assistant Director of Resources (Financial Services), Head and Deputy Head of the SWLAP. Unless amended and agreed by the Shared Service Board, the Head of the SWLAP is the statutory Head of Internal Audit for RB Kingston, LB Richmond and AfC. The Deputy Head of the SWLAP is the statutory Head of Internal Audit for LB Merton and LB Sutton. The Assistant Director of Resources (Financial Services) will take the lead as the statutory Head of Internal Audit for LB Wandsworth for SWLAP. All of these officers will support each other in the delivery of these roles.

The Corporate Fraud service will be delivered by the South West London Fraud Partnership, led by the SSA. This is a shared service which is overseen by the Shared Service Board.

Key Performance Targets

Key Performance Targets are established and monitored on a quarterly basis by the Shared Service Board. A Service Plan and Risk Register have also been established and are reported to and monitored by the Shared Service Board.

Monthly reports on corporate fraud work undertaken by the SWLFP will be provided to the Head of Internal Audit and 6 monthly reports made to Audit Committee.

Audit Planning

The Head of Audit has responsibility for preparing a balanced internal audit plan, ensuring audit maintains its independence, ensuring independence and sufficient coverage to support the annual opinion.

Each year, an audit plan will be discussed and agreed by the respective Directors, Senior Leadership Teams and Audit Committees which will be based on the following:

- Issues identified in the Annual Governance Statement and Action Plan
- Discussions with the Council's Departmental Management teams (DMT).
- Discussions with Council's Corporate Management teams (CMT) if required.
- Discussions with the Shared Service Board.

- Review of Corporate and Service Risk Registers/ Risk Returns
- Outputs from other assurance providers
- Outputs from previous audit or fraud assignments
- Requirements as agreed with External Audit

The Head of Internal Audit will ensure attendance at all DMT meetings as part of the annual planning process to ensure that management views and suggestions are taken into account. when producing the audit plan. Key to ensuring that the service adds value is maintaining a dynamic audit plan which responds to changes in the organisation's risk profile. This is managed through quarterly reporting and attendance at DMT meetings during the year to discuss the audit plan and departmental risks.

The Internal Audit Plans are based on the following:

- **Governance Arrangements:** Internal Audit have a key role in assessing the effectiveness of governance arrangements by comparison with principles contained in the CIPFA/SOLACE Governance Framework. A number of audits will support this assessment and will take account of any emerging governance arrangements.
- **Transformation:** Considering the significant financial challenges facing the public sector and the all the council's ambitions, the annual audit plan will need to be flexible enough to respond to emerging issues and risks from change.
- Risk Based Systems Audit: Audits of systems, processes or tasks where the internal controls are identified, evaluated and confirmed through a risk assessment process. The internal controls depending on the risk assessment are tested to confirm that they are operating correctly. The selection of work in this category is driven by the AGS, Corporate Risk Registers, Departments' own risk processes and will increasingly include work in areas where the Council services are delivered in partnership with other organisations.
- Value for money: This is an integral part of our risk-based audit approach, in particular being alert to opportunities and reporting issues and agreed management actions.
- **Key Financial Systems:** The effectiveness of controls and management of risks within key financial systems remain a core part of our audit work. We continue to develop our audit approach to give greater assurance.
- **Probity Audit (schools and other establishments):** Audit of a discrete unit. Compliance with legislation, regulation, policies, procedures or best practice is confirmed. For schools this includes assessment against the Schools Financial Value Standard
- **Computer Audit:** Information technology is fundamental to the delivery of all the council's services and is an area of rapid change. Due to this high risk, providing assurance on the adequacy of electronic systems and controls is a key part of our annual audit plan.
- **Contract Audit:** Changing approaches to procurement and contract management are a key part of delivering improved services. This also brings additional inherent risks that need to be managed. Audits of the procedures and processes for the letting and monitoring of contracts, including reviews of completed and current contracts.
- **Special Projects:** Specific areas of Council business which may be subject to change through the development and implementation of new systems, or delivery models, where poor value for money or failing service standards have been identified or where there are new or significant risks will be targeted for review as part of the audit planning process.
- **Risk Management:** Risk management support is provided to some of the partners to facilitate the review and implementation of risk management strategies and to take the lead in compiling the Annual Governance Statement. Where this function is

provided by the SWLAP, an independent review is undertaken by the Internal Audit contractor under the Croydon Framework contract to ensure independence. This review will assess the risk management arrangements, including risk strategy, adequacy of strategic and operational risk registers and the extent to which it is embedded.

- **Partnerships:** Councils are increasingly operating and delivering services jointly through partnerships. This brings risks and opportunities to councils and the delivery of services. We will review key partnerships.
- **Provision of advice and support:** Increasingly Internal Audit are involved in providing advice and support on an ad hoc basis. This may involve the provision of general advice on risks and controls or more detailed work with specific business areas where there are significant changes to systems and processes or decisions which require independent due diligence. The Heads of Audit also sit on boards, such as Information governance boards and working groups, corporate governance and risk management.
- Fraud, Corruption and Financial Irregularities: The SWLFP will investigate fraud and irregularity arising during the year and may work alongside officers from the SLWAP on cases particularly where there are significant control issues requiring audit and fraud input. The audit plan will also include a programme of pro-active fraud checks.
 - **Follow up work:** Follow up work on outstanding audit recommendations will be regularly undertaken. Progress will be reported to Audit Committee and where progress is unsatisfactory, or management fail to provide a satisfactory response to follow up requests this will be reported to the relevant Assistant Director, Director or Audit Committee where required.

Consultancy Work

From time to time, and upon request from management, the Internal Audit team complete consultancy work.

Consultancy work is defined as: Advisory and related client service activities, the nature and scope of which are agreed with the client, and which are intended to add value and improve an organisation's governance, risk management and control processes without the internal auditor assuming management responsibility. Examples include counsel, advice, facilitation and training.

Policies and Procedures

All audit work will be undertaken in accordance with Council regulations and professional standards. There is an Audit Manual and Internal Audit Protocol which sets out the audit process for staff to adhere to, including quality control procedures.

Quality Assurance and Improvement Programme

The Head of the South West London Audit Partnership continuously reviews the quality and effectiveness of all aspects of the Internal Audit service. This includes:

- Establishing procedures that comply with the Public Sector Internal Audit Standards
- Maintaining a professional audit team with sufficient knowledge, skills and experience to carry out the Audit Plan. This includes undertaking appraisals and ensuring that training needs are identified and addressed.
- Undertaking, reviewing and acting on client satisfaction surveys and feedback
- Reviewing audit methodology and benchmarking against best practice.
- Independent review of all audit assignments undertaken.

In line with the Public Sector Internal Audit Standards, Internal Audit has a quality and improvement programme in place. The results of the quality and assurance programme and progress against any improvement plans will be reported in the Annual reports to each Borough's Audit Committees

Agenda Item 9

Committee: Standards and General Purposes Committee

Date: 5th March 2024

Subject: Fraud Update

Lead officer: Asad Mushtaq - Executive Director of Finance & Digital Lead member: Martin Whelton Chair of Standards and GP Committee Contact officer: Kevin Holland – Head of Shared Fraud Partnership

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Recommendation:

That members note this Fraud Update on the activity completed during 2023/24 to 31st January 2024, and comment on the matters arising from it, and note the indicative Fraud Plan for 2024/25.

1. Purpose of Report and Executive Summary

- 1.1 One of the responsibilities of the Committee is to maintain an overview of the effectiveness of the Council's arrangements for corporate governance, particularly those concerned with risk management, internal control, financial governance, treasury management, and counter fraud and corruption; obtaining assurance that appropriate action is being taken on any issues raised.
- 1.2 Members recognise that the funds the Council administers and services it provides are targeted by fraudsters, and support the fight against Fraud and Corruption through an anti-fraud strategy and culture that seeks to:
 - Have robust arrangements and executive support to ensure anti-fraud, bribery and corruption measures are embedded throughout the organisation.
 - Acknowledges and understands fraud risks and commits to support and resource tackling fraud through maintaining a robust anti-fraud response.
 - Prevent and detect more fraud by making better use of information and technology, enhancing fraud controls and processes and developing a more effective anti-fraud culture.
 - Prioritises fraud recovery and the use of civil sanctions. Developing capability and capacity to punish fraudsters. Supports collaborative work across geographical sector boundaries. Learning lessons and reducing fraud risks where possible.

- Protect ourselves, residents and service users from becoming disadvantaged by those seeking to commit fraud through recognising the harm that fraud can cause in the community and seeking to minimise this.
- 1.3 This report seeks to provide the Committee with assurance over the arrangements for protecting the Council, it's residents and service users against fraud and corruption.
- 1.4 Merton Council entered into a shared fraud investigation service, known as the South West London Fraud Partnership (SWLFP), with Kingston, Richmond, Sutton & Wandsworth Councils, in April 2015. This pooling of resource under a single team helps strengthen resilience for individual authorities, enhances collaborative approach to fraud investigations and introduces the ability to undertake regional proactive counter fraud exercises, and have call upon a larger fraud resource when needed, enhancing both capacity and capability.
- 1.5 For 2023/24 the SWLFP investigation team comprises 14.5 posts, with a mixture of expertise from both within and outside local government. All Investigation Officers are members of the Government Counter Fraud Profession (GCFP) and in addition we have three officers who are completing the GCFP Counter Fraud Investigator Apprenticeship. The professionalisation of the team will help ensure investigative techniques are both current and legally compliant, helping to sustain capability.
- 1.6 Individual partner authorities retain responsibility for ensuring that its affairs are managed in accordance with proper standards of financial conduct and for preventing and detecting fraud and corruption.
- 1.7 Members can be reasonably assured that there are suitable systems in place for the identification and investigation of allegations of fraud. A good number of referrals are received from in-house teams which is a good indication that a reasonable level of fraud awareness exists across all Council staff supported by the Council's Anti-Fraud and Anti-Corruption Strategy and culture.

2. Fraud Risk Threat and 2024/25 Indicative Fraud Plan

- 2.1 The Fraud Risk Threat has changed significantly in recent years with a substantial rise at a national level in the volume of reported fraud to a level where fraud is the largest reported crime type.
- 2.2 The current financial climate has also had an impact on those who commit fraud. The rise in the level of fraud risk threat combined with new methods being used within the fraudsters community means that it is increasingly more difficult to recover losses highlighted through detected fraud, so the need to ensure that effective prevention measures exist is even more important.
- 2.3 This increase in the fraud risk threat does not mean that there will be an automatic increase in fraud occurrences for the council but will likely be reflected in the volume of attempts. The need to ensure consideration and

- understanding of the likely fraud risk threats of any new initiative are considered at the earliest stage is an important step to effective fraud prevention and reducing the likelihood of successful fraud attacks against council funds.
- 2.4 This has been reflected within the indicative fraud plan with the level of resource that has been allocated to fraud prevention work and the need to continue with close working alongside Internal Audit who provide assurance over the effectiveness of the Council's control environment. This approach should ensure that the Council is well placed to meet the challenge of the new Corporate Offence on 'Failure to Prevent Fraud' that is included within the new Economic Crime and Transparency Bill.
- 2.5 Priority areas of coverage for individual partner Councils are agreed through consultation with the Shared Services Board and the Heads of Audit.
- 2.6 Tables 1 & 2 provide an indicative breakdown of how the fraud resource for 2024/25 have been allocated in terms of reactive and proactive work, with a split by fraud type for reactive resources, and the key performance targets.

Table 1: 2024/25 Indicative Fraud Response Plan

	Estimated	%	Reactive Resource %
	Days		Allocation by fraud type
Reactive Resource			Internal (e.g. employee) 27.0
- Referral Triage & Review	36	8.8	CTR/SPD/Support Grant 6.4
- Fraud Investigations	249	60.9	Parking Permit 4.9
Fraud Prevention			Corporate – Other 24.5
- Proactive Fraud Drives	80	19.6	Tenancy 34.7
- Fraud Awareness	21	5.1	
Contingency	23	5.6	Housing applications 2.5
TOTAL	409	100.0	

- 2.7 The SWLFP continues to work closely with the Social Housing Providers in relation to concerns over tenancy fraud and abuse and facilitate the Social Housing Investigation Partnership (SHIP), a forum that is accessible to social housing providers who have property within at least one of the fraud partnership authorities. Every property recovered frees up a place for a family on the Council's waiting list therefore reducing the impact of the temporary housing costs on the General Fund.
- 2.8 Partnership working provides a sound framework to help identify and respond to tenancy fraud and abuse resulting in the recovery of misused tenancies which can be assigned to those in genuine eligible need thus reducing the call upon temporary housing provided by local authorities.

Table 2: Key Performance Targets 2024/25

Activity	Performance Indicator	Target	
Work with Housing Associations and Housing teams to establish and deliver a programme of proactive fraud checks including illegal subletting	Properties brought back into Housing Associations/ Council control following identification of fraud	8 properties	
Develop joint working with Housing teams to proactively identify housing fraud and data cleansing	Housing applications withdrawn as a result of fraud work and intervention	5 applications withdrawn 15 applications removed through data cleansing	
Delivery of the Fraud Plan	% of the Fraud Plan delivered	95% of the Fraud Plan by 31 March	

3. Summary of Fraud Investigations and Performance Results

3.1 The Tables below summarise the fraud work undertaken, with Table 3 summarising progress against the key fraud performance targets. In total, 78 fraud cases have been worked on since 1st April 2023 (46 new cases, with 32 cases c/f from 2022/23) because of either referral received, or concerns highlighted through pro-active fraud drives. This equates to 65 cases per reactive investigative FTE resource, which is only manageable by utilizing a pooled investigative resource and accessing fraud type expertise.

Table 3: Performance against key objectives and targets for 2023/24

Activity	Performance Indicator	Target	Actual As at 31/01/24
Work with Housing Associations and Housing teams to establish and deliver a programme of proactive fraud checks including illegal subletting	Properties brought back into Housing Associations/ Council control following identification of fraud	9 properties	4 (6 cases are with legal for recovery action)
Develop joint working with Housing teams to proactively identify housing fraud	Housing applications withdrawn as a result of application reviews	20 applications withdrawn	4 applications withdrawn (see paragraph 3.6)
Delivery of the Fraud Plan	100% of the Fraud Plan	95% of the Fraud Plan by 31 March	85.2%

3.2 Tables 4 and 5 provide a breakdown of the fraud/abuse referrals that have been accepted for investigation and a summary of the value of fraud/overpayments and notional savings identified as a result of the fraud work undertaken, with comparisons to previous years.

Table 4: Summary of fraud referrals & data cleansing matches

	2021/22	2022/23	2023/24 To 31/01/24
Referral worked on in period for			
investigation by type:			
- Tenancy fraud/abuse	40	33	32
- Right to Buy	5	2	0
- Permit Fraud	3	9	7
- Internal - Employee	10	11	8
- External - CTR & SPD	12	23	14
- Other	11	18	11
Other Data Cleansing Matches			
- Housing application records	66	83	6
Total referrals in period	147	179	78
Closed in period			
- Closed no fraud	33	43	23
- Closed with sanction	78	104	19
Referrals still under investigation	36	32	36

Table 5: Summary of Overpayments and Notional savings

(* notional savings figures as per Audit Commission estimates)	2021/22 £	2022/23 £	2023/24 £ To 31/01/24
Social Housing (notional @ £93k per	465,000	93,000	372,000
property recovered from 2020)	(5 props)	(1 prop)	(4 props)
Right to buy (notional @ £100k	100,000	100,000	0
discount)	(1 app)	(1 app)	Nill
Blue Badges & Parking Permit (fines plus notional @ £575 per case from 2020)	1,150	4,257	1,150
Internal – Employee (notional £6k per	24,000	24,000	18,000
case)	(4 cases)	(4 cases)	(3 cases)
Council Tax (identified overpayments	43,882	22,521	8,206
and administrative penalties)			
Other/NFI	188,700	34,000	214,947
Data Cleansing Matches Housing	191,160	262,440	12,960
Applications Removed	(59 apps)	(81 apps)	(4 apps)
Total actual and notional savings	1,013,892	540,218	627,263

- 3.3 **Housing Fraud:** Whilst Merton Council do not directly manage any social housing, the cost of temporary accommodation does rest with the Council and every property, that is being misused, recovered represents a nomination right for the Council, the opportunity to place a family in need into more secure accommodation which reduces the call upon Council funds.
- 3.4 The CIPFA Fraud and Corruption Tracker 2020 reported that the largest fraud area across the housing sector was 'other tenancy frauds' which includes false applications for housing and false tenancy succession applications.
- 3.5 We are working closely with housing services and housing providers to address the lower-than-expected volume of housing fraud referrals and have offered and provided fraud awareness sessions to housing teams.
- 3.6 **Housing Applications:** Inaccurate or outdated housing application/waiting list data could result in an incorrect offer of a secure tenancy and increases the fraud risk of false applications succeeding with acquiring social housing. In addition to investigating referrals of suspected false applications the Council, through the National Fraud Initiative (NFI) participate in data matching which helps deliver some data cleansing and helps reduce the risk of fraudulent or incorrect allocations on social housing.
- 3.7 This year it was agreed with the Head of Housing Needs and Strategy that their team would review the matches and access to the NFI portal was provided to his team. In total there are 901 matches that include 138 matches to the deceased persons register with the remainder being matches to out of borough addresses and tenancies with an expectation that 75% plus of these will need to be removed. We await feedback from his team on the number of applications that have been removed.

4. Developments in Fraud Detection and Prevention

- **4.1 Public Sector Fraud Authority (PSFA):** The establishment of the PSFA in August 2022 marked a step change in the Government's counter fraud strategy. With increased investment in counter fraud capability, the PSFA will increase the support services it can offer on fraud, including through advanced analytics.
- 4.2 The fundamental challenge that public bodies face with fraud is that it is often a hidden crime with those committing it actively try to conceal it so we must be proactive in our efforts to seek it out.
- 4.3 **Data Analytics:** The principles for maximising collaborative and smarter working through data sharing are key to the successful operation of the National Fraud Initiative.

- 4.4 Fraudsters are not restricted by Borough boundaries or public sector organisation. To meet this challenge, London Councils working collaboratively have established a London centric fraud hub. This is intended to enhance localised intelligence sharing and data-matching, with an opportunity for closer to real-time data-matching or areas of local concern. It can also provide an online repository that can be used to validate applications for certain Council provided services.
- 4.5 **Data Cleansing:** In addition to fraud identification, data matching and analytics assist Council's with maintaining the accuracy of their data. Key decisions on resource allocations are influenced by movements in core datasets and/or the identification of new or different trends.
- 4.6 The most recent Department for Levelling Up, Housing and Communities housing statistics show that as at the end of March 2021, there were 1.2 million households on social housing waiting lists across England. Removing applicants who are not eligible will help councils to allocate social housing to those in genuine need. As part of the current NFI exercise, nationally over 7,000 ineligible applications have been removed by 102 councils.
- 4.7 <u>National Fraud Initiative (NFI):</u> The Mandatory National 2022/24 NFI exercise is about to commence where data is requested in accordance with Part 6 of the Local Audit and Accountability Act 2014 and for Merton Council this meant the provision of the following datasets:

Blue Badge Parking Permits Deferred PensionsCreditors History Pensions Gratuities

Creditors StandingConcessionary Travel PassesPensionsPayroll

- Council Tax Reduction Scheme Resident Parking Permits

Right to Buy Waiting Lists

- 4.8 On-line Fraud Awareness Training: An on-line fraud awareness training package, aligned to Merton Council's policies and procedures, has been made available for all officers to increase awareness and understanding of how and to who suspicions of fraud or irregularity should be reported. With continual changes in staffing and staff roles regular reminders on fraud awareness helps support and robustly maintain the Council's Anti-Fraud and Anti-Corruption Strategy and Culture.
- 4.9 The on-line fraud awareness training package for officers has been revised and is now separated into three modules covering: Anti-Bribery & Corruption, Whistleblowing and General Fraud Awareness. The modules have been provided to the Human Resource Team who will be making it available to all officers on the new training platform.

5. Local Government Transparency Code.

5.1 Under the code the Council is required to publish the following data regarding its Fraud Investigation activity. Listed below are 2023/24 figures to 31/01/2024 (with 2022/23 comparative figures).

Accredited number of occasions they use powers under the Housing Fraud (Power to Require Information) (England) Resimilar powers		
	22/23	23/24
		To 31/01/24
Prevention of Social Housing Fraud (Power to Require		
Information) (England) Regulations 2014	3	4
The Council Tax Reduction Schemes (Detection of	_	_
Fraud and Enforcement) (England) Regulations 2013	0	1
Total number (absolute and full time equivalent) of employed investigations and prosecutions of fraud		
	Absolute	FTE
Fraud Investigation - SWLFP	15 (15)	14.5 (14.5)
Government Counter Fraud Profession (GCFP)	12 (n/a)	11.5 (n/a)
GCFP Counter Fraud Investigator Apprentices	3 (n/a)	3.0 (n/a)
Total amount spent by the authority on the investigation and	prosecution	of fraud 23/24
	22,20	20,2:
Fraud Investigation, awareness & prevention	£131.1k	£136.1k
Total number of fraud cases investigated.		To 31/01/24
Housing/Tenancy related Investigations	116	38
Right to Buy/Acquire	2	0
Permit Fraud Investigation	9	7
Other Investigations	<u>52</u>	<u>33</u>
TOTAL	179	78

5.2 To ensure that sufficient knowledge and capability for fraud investigation Merton Council entered a partnership with four neighbouring boroughs, the SWLFP. The Council has access to the pool of trained fraud investigation officers' dependent upon the demands of any individual fraud referral. Merton Council's resource contribution for 2024/25 equates to 2.0 FTE Investigators.

6. Financial, Resource and Property Implications.

6.1 There are no specific financial, resource or property implications. completed within existing resources.

7. Legal and Statutory Implications

7.1 This report provides details of fraud activity levels as requited under the Local Government Transparency Code.

8. Human Rights, Equalities and Community Cohesion Implications

8.1 There are no specific human rights, equalities or community cohesion implications, except in so far as this report is wholly concerned with good governance.

9. Risk Management and Health and Safety Implications

9.1 There are no specific risk management or health and safety implications.

GLOSSARY

CIPFA	Chartered Institute of Public Finance and Accountancy
CTR	Council Tax Reduction
GCFP	Government Counter Fraud Profession
FTE	Full Time Equivalent
NFI	National Fraud Initiative
PSFA	Public Sector Fraud Authority
SHIP	Social Housing Investigation Partnership
SPD	Dingle Person Discount
SWLFP	South West London Fraud Partnership



Committee: Standards and General Purposes Committee

Date: 5 March 2024

Subject: Report on the use of temporary workers and consultants

Lead officer: Polly Cziok – Executive Director Innovation and Change

Lead member: Councillor Billy Christie

Contact officer: Kathryn Wittams-Smith, Acting Head HR

Recommendations:

A. To note progress made to monitor and control the use of agency workers and ongoing processes to continue to reduce agency use and spend

- B. To note initiatives for promoting apprenticeships and use of the apprenticeship levy
- C. To note actions being taken to promote Merton Council as an employer of choice
- D. To note recruitment process monitoring with the emphasis on Equality, Diversity and Inclusion

1. Purpose of report and executive summary

The Committee has received regular progress reports in relation to the number and cost of higher cost agency appointments used in the council and the mechanisms in place to monitor the use of these workers. This report now defines 'higher cost' agency workers as those earning over £60 per hour or £400 per day whereas previous reports have reported this as £30 per hour or more. This is in line with inflationary costs for agency workers.

Over the past quarter there has been a significant reduction in agency spend specifically leadership/senior posts which now account for 46% of the total agency spend as opposed to the previous quarter at 54%. The reduction equates to £646,000. The council currently has the lowest number of agency workers for the past two years.

Eighteen administrative posts are currently covered by agency workers.

Senior roles and health and social care staff are the two highest categories for agency spend.

The top three reasons for engaging agency workers are permanent post position cover, project cover and increased workload.

There are currently 37 apprentices across the council.

The council attracts 66% of applications for permanent roles from Black, Asian and Minority ethnic candidates, with 60% being shortlisted and 58% of job offers. For senior roles this is more variable with the majority of posts being filled by white applicants in the past two quarters although this accounts for a small number of

posts (4). The REN group monitor all senior recruitment and are included in interview panels.

The council's new recruitment website has been launched and promotion of benefits in working for the council including family friendly benefits, early careers support and apprenticeships.

The senior pay review will be implemented on 1 April 2024 and will eliminate market supplements in most cases.

2. Details

- 2.1 The agency central monitoring database [Appendix 1] holds details of all agency workers. Consultants who fall outside of IR35, also known as the 'Intermediaries Legislation' or off-payroll by the HMRC, are detailed separately and can be defined as specialist consultants not working in an established graded role
- 2.2 The database is updated on a monthly basis and provided to departmental management teams (DMTs) along with quarterly HR Metrics data. This data is also used for this committee report.
- 2.3 This committee, in recognising that the South London Legal Partnership (SLLP) serves five boroughs with a proportion of the cost being shared and recharged to partner boroughs, has requested that SLLP is now shown separately.
- 2.4 The current contract with Comensura started in December 2021 and runs until December 2025. Procurement will be undertaken in January 2025.
- 2.5 The majority of agency workers are appointed through the Council's corporate contract with Comensura. Whist there has been an increase in the costs of agency workers this represents a large reduction in appointments that have, in the past been through the Local Government Resourcing Partnership this being more expensive than Comensura. The council have also reduced the off-contract spend and there are now no off-contract workers. Engaging agency workers through the Comensura contract has resulted in cost savings as the council can achieve the best value whilst still attracting high quality agency workers. There are robust processes in place to manage the process for engaging temporary staff, which requires a business case, CMT approval and budgetary checks.
- 2.6 A 'Temp to Perm' mechanism is in place whereby agency workers can be converted to direct employment, subject to safeguards to ensure there is no conflict of interest and that named individuals are not hired via agency and then offered direct employment with no competitive selection. Appointment to senior roles which require member-level involvement continue to be dealt with in the normal way. The aim is to encourage agency workers, particularly those in hard to fill roles, to become employees. Any such conversions will only be to posts that have been subject to full establishment control processes.
- 2.7 Merton Council is investing in building talent pipelines and having a succession plan in place by utilising the apprenticeship levy and 'growing our own' talent to create career pathways.

Apprenticeship routes are funded by the apprenticeship levy, a compulsory monthly charge of 0.5% of the Council's wage bill. By investing in the development of our employees, Merton Council is able to upskill new employees and our current workforce to reduce the number of specialist agency/interim workers required.

Merton Council has an aging workforce, with twice as many over 60s as under 30s on the payroll, and more than 50% of the workforce nearing retirement age. It is vital for the long-term sustainability of the organisation that Merton makes a concerted effort to attract and retain a younger workforce. Apprenticeships will play an important part in this, in providing high quality opportunities to local young people, and in promoting the Council's role as a local employer.

Currently Merton has 37 active apprentices: 24 at entry level and 13 at higher level. 12 of these apprentices are funded through the apprenticeship reserve, which is administered by the OD team. This one-off funding is depleted and there is no current plan to replace it.

Apprentices February 2024

Apprenticeship	Level	Directorate	Number of apprentices
		505	
Accountancy or Taxation Professional	7	F&D	2
Business Administrator	3	CLLF	8
Business Administrator	3	I&C	4
Apprentice social worker	6	CLLF	2
Digital and Technology Solutions Professional	6	I&C	1
HR Support	3	I&C	3
Improvement Technician	3	CLLF	1
Information Communications Technician	3	F&D	1
Paralegal	3	I&C	2
Public Health Practitioner	6	ASCICPH	2
Revenues And Welfare Benefits Practitioner	4	F&D	5
Social Worker	6	CLLF	3
Social Worker	6	ASCICPH	2
Solicitor	7	I&C	1
Total	1	1	37

The Apprenticeship Lead post is now funded from the mainstream budget and a number of initiatives are taking place:

- Restructure policy to include a percentage of posts to be created for apprenticeships.
- Promotion on the recruitment website with applications prioritised to people living or being educated in Merton. Towards Employment team notified of all opportunities with guaranteed interviews for care leavers/care experienced young people.
- Support an apprenticeship network
- Training for apprenticeship managers
- Mainstream funding for apprenticeship posts rather than reserves
- 2.8 In April 2023, Merton increased the number of departments from four to six. This report reflects the new departments.
- 2.9 The committee have requested this report includes data on all agency workers and not just those that are considered high cost, chart 1 shows the distribution of agency workers in each directorate, the total candidates being 294 in January 2024.

Chart 1

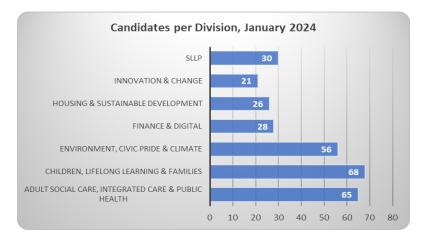
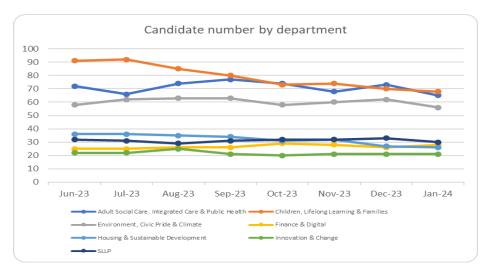


Chart 2 provides the number of candidates in each division over the past two quarters. The candidate numbers have decreased in all departments since the end of quarter 1 and increased minimally in Finance and Digital by three.

Chart 2

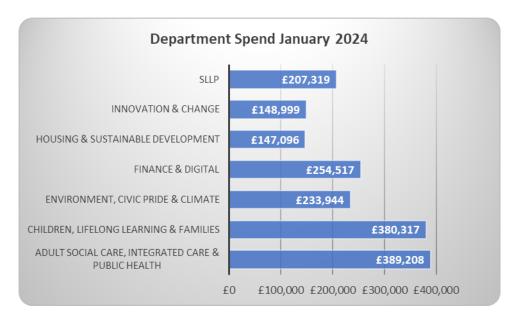


Division	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Total
Adult Social Care, Integrated Care & Public Health	72	66	74	77	74	68	73	65	-7
Children, Lifelong Learning & Families	91	92	85	80	73	74	70	68	-23
Environment, Civic Pride & Climate	58	62	63	63	58	60	62	56	-2
Finance & Digital	25	25	26	26	29	28	26	28	3
Housing & Sustainable Development	36	36	35	34	31	32	27	26	-10
Innovation & Change	22	22	25	21	20	21	21	21	-1
SLLP	32	31	29	31	32	32	33	30	-2

2.10 Agency spend has decreased since October 2023 when measures were introduced to provide a CMT overview and challenge for all recruitment activities including extending agency assignments, new agency assignments and direct employment. Chart 3 shows the agency spend by department in January 2024 as December would include a reduction due to agency workers taking leave over the festive period so does not provide a realistic picture for this month.

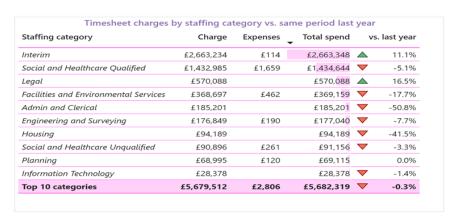
Division	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Total
Adult Social Care, Integrated Care & Public Health	£351,308	£452,346	£375,075	£392,379	£510,449	£489,306	£400,923	£389,208	£37,900
Children, Lifelong Learning & Families	£425,753	£560,152	£407,384	£372,361	£463,984	£458,973	£371,671	£380,317	-£45,436
Environment, Civic Pride & Climate	£212,033	£291,041	£259,506	£261,677	£290,927	£274,046	£241,604	£233,944	£21,911
Finance & Digital	£226,417	£301,704	£228,544	£231,118	£308,712	£307,672	£212,322	£254,517	£28,100
Housing & Sustainable Development	£185,334	£217,211	£162,687	£162,745	£189,420	£190,563	£137,645	£147,096	-£38,238
Innovation & Change	£124,299	£142,511	£156,372	£153,156	£155,706	£167,895	£138,562	£148,999	£24,700
SLLP	£179,162	£193,274	£178,965	£182,096	£207,770	£235,967	£201,926	£207,319	£28,157

Chart 3



2.11 The following tables provide an overview by the top ten staffing categories and total spend. These charts define interim as higher spend agency workers in senior established posts. Quarter 4 shows a reduction in all categories apart from Legal (SLLP posts).

Quarter 3 - (July - September 2023)



Q4 (October – December 2023)

Timesheet charges	by staffing cat	egory vs. sar	ne period last	year
Staffing category	Charge	Expenses	Total spend	vs. last year
Interim	£2,654,885	£446	£2,655,331	-8.5%
Social and Healthcare Qualified	£1,465,898	£1,782	£1,467,680	-5.1%
Legal	£648,639		£648,639	1 9.0%
Facilities and Environmental Services	£348,865	£734	£349,599	-25.3%
Engineering and Surveying	£179,532	£198	£179,730	-2.9%
Admin and Clerical	£149,523		£149,523	-59.9%
Housing	£78,845		£78,845	-53.4%
Planning	£66,941	£86	£67,027	0.0%
Social and Healthcare Unqualified	£64,632	£384	£65,016	-29.9%
nformation Technology	£19,708		£19,708	-30.3%
Top 10 categories	£5,677,468	£3,630	£5,681,098	▽ -10.0%

2.11 The following charts provide the total spend by the order justification, the highest being cover for permanent roles. This can be due to a number of factors including a gap between recruiting permanently for the role, a pending restructure or that the post is hard to fill with direct competition for employees from surrounding boroughs. This is particularly the case for Children's Social Workers, Planners, IT staff and Lawyers.

Chart 4





2.12 Local Government Resourcing Partnership Contract (LGRP)

This contract is used if roles have not been fulfilled through the standard Comensura contract. There are currently only two workers via this contract both being senior roles in Accountancy.

Off Contract

There are currently no off-contract workers.

IR35

There are currently three workers who meet the definition of working outside of IR35 all are specialist project posts.

Job title	Division	Hiring manager	Weeks worked	Weeks remaining
Waste & Street Environm	Environment, Civic Pride	Dan Jones	29	23
Parking Procurement Con	Environment, Civic Pride	Gavin Moore	26	22
Waste Procurement Cons	Environment, Civic Pride	Dan Jones	22	4

2.13 The Committee have requested information on agency use to cover administrative officer roles. These are roles that are often short-term cover due to work volume, grant funding, maternity leave or short-term cover. Where possible administrative roles are reviewed for suitability for an apprenticeship role, this is not possible for short term role cover as apprenticeships require an education path alongside employment of at least 2,000 hours up to 12,000 hours.

There are currently 18 agency workers in roles that could be described as administrative. Chart 5 shows the order justification and chart 6 shows the departments for these administrative posts.

The challenge process adopted by CMT reviews all posts requesting agency cover or extensions for existing assignments and whether these could provide an apprenticeship opportunity.

Chart 5

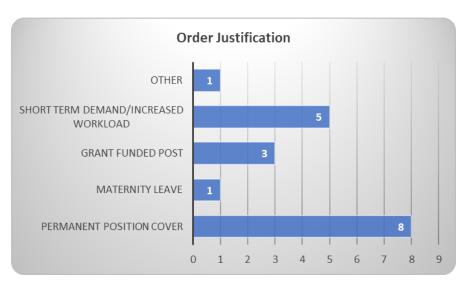


Chart 6



2.14 The number of higher cost agency workers has reduced in January in most areas and has remained the same in Finance and Digital with three current workers on this

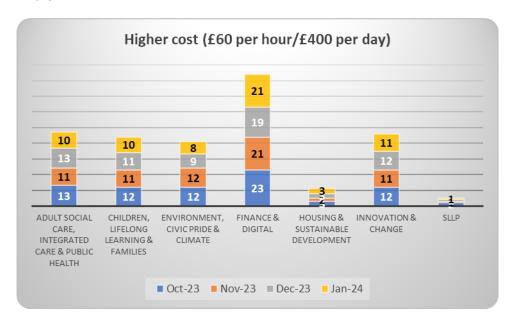
rate, there is currently a very competitive market for skilled IT and Digital professionals which are required to realise the ambitious digital transformation plans.

Public Health is also an area where the market is competitive alongside specialist project posts for the Section 75 transfer of mental health staff back to the council.

The Street Cleansing insourcing project has also required specialist project management for the duration of this project in Environment, Civic Pride and Climate.

Higher cost agency posts, often called consultants or interims are in [Appendix 2]

Chart 7



2.11 The committee requested the agency 'mark-up' for agency worker posts. For most posts this is 0.40 on top of the hourly charge rate from the agency which also includes the cost for the working time directive (annual leave), pensions, apprenticeship levy and holiday pay. Those with rates over £300 per day being 10% of the total cost. The cost pressure tends to be a competitive market rather than the agency charge rate.

2.12 Temporary to Permanent Conversions

Agency/interim workers are being asked to convert to direct employment, this is across the board where posts are on the establishment and required (not grant funded or project work).

In 2023 32 conversions have taken place.

- 3 Planning Officers
- 8 Civic Enforcement Officers
- 2 Director Level roles in Adult Social Care, Integrated Care and Public Health
- 2 social workers both in Adult Social Care
- 10 staff that work in administrative function roles.
- 2.13 Agency social workers (particularly children's) are an area where permanent staff are more preferable not only for cost reasons but for stability all agency social workers have been invited to briefings where they are provided with the benefits of direct employment and also how to compare actual salary taking into account pension benefits, annual leave, training costs etc. These will continue to be scheduled periodically to ensure social workers are able to make informed choices and are aware of the opportunity through a straightforward process.

Three briefings have taken place over the past quarter; two with children's social workers and one with adult social workers.

London Pledge

The council has signed the London Pledge which limits the hourly rates for agency social workers to assist with stabilising competition for temporary workers.

The London Pledge is a pan-London commitment by Children's Services system leaders to work cooperatively and transparently to manage the agency supply chain, improve the quality of agency staff and regulate pay rates within Children's Social Work.

2.14 Executive Directors have been invited to provide short overall summary comments on agency/consultant usage and action being taken in their area, please see below.

Children, Lifelong Learning & Families – Jane McSherry

The main area of agency staff usage within Children Lifelong Learning and Families (CLLF) remains social workers. The workforce challenge in children's social care continues to impact locally, regionally and nationally. CLLF continues to work closely with HR to recruit and reduce agency social workers. We have had a number of staff move from temporary to permanent contracts and we run regular events for agency staff with HR to outline the benefits of moving to permanent contracts with the Council.

Eight further trainees who will have completed their assessed and supported year in employment (ASYE) will become case holding social workers in the autumn, further reducing the dependency on agency staff. We have a thriving Social Work Academy to encourage social workers to train through a variety of routes ensuring a future pipeline of trainees and we are expanding this provision.

The other main group of agency workers in CLLF are for specialist posts such as Speech and Language Therapists which provide part of the statutory requirements of children and young people's Education, Health and Care Plans (EHCPs). These roles are very specialist, and nationally there is a shortage of suitably qualified candidates for therapists. A variety of recruitment strategies have been undertaken to secure substantive post holders, including looking to other countries, and we anticipate more permanent recruitment in this area, which will assist in reducing the reliance on agency workers

Adult Social Care, Integrated Care and Public Health – John Morgan

The ASC, IC & PH department has reduced the number of agency and interim workers in the first half of 2023/24 and have worked to move a number of interim staff onto fixed term contracts or to permanent contracts. Temporary staff have been retained to ensure that vacant posts are filled so we have appropriate operational capacity in our social care teams. The department also uses additional short-term capacity, in both Public Health and Adult Social Care where appropriate and posts are generally funded from various non-recurrent grants, on time limited and specific projects and programmes of work. A number of current temporary assignments, primarily relate to delivery of the department's Towards Outstanding transformation programme, which includes, significantly, our preparation for Care Quality Commission Assurance of Adult Social Care departments and our planned LGA peer review of our preparation for the CQC quality assurance in June 2024.

Adult Social Care currently have 6 (included in the total figure of 9 for the Department) agency workers via Comensura, who have been here over 24 months. A number of initiatives have been implemented to focus on recruiting and retaining permanent staff. This included hosting a Temp to Perm event for all social work operational staff currently engaged with us via an agency. The workforce challenge in social care continues to impact locally, regionally and nationally. Equally, we

have been recruiting to posts to support additional operational delivery capacity, particularly for seasonal pressures of the winter, through grant that is only confirmed for single financial years at a time, such as the Adult Social Care Discharge Fund. Funding confirmed in this way does not help us commit to permanent recruitment for some roles. Though we have had limited success with even temporary roles, the main route for this workforce is through Comensura and adds to the numbers of agency workers we employ.

To support recruitment and retention of permanent staff, we have implemented an apprenticeship scheme and offered enhanced training and development opportunities. We are working with the Teaching Partnership to get Assessed and supported year in employment (ASYE) social work applicants who can convert to permanent staff and this has proved successful. We aim to continue to reduce significantly our reliance on agency staff by maintaining focus on recruiting to our permanent vacancies throughout 2023/24.

Innovation & Change – Polly Cziok

We have an ongoing recruitment campaign but still have limited success in attracting permanent staff, particularly lawyers. We are looking at further temp to perm opportunities, alongside an increase in apprenticeships within SLLP but there has also been an increase in short term demand within SLLP as there has been an increase in Children's social care cases and the Courts are not open to progress cases.

We have gone out to permanent recruitment on a number of senior roles within Innovation and Change and have reduced the number of senior agency workers. Senior previously high-cost posts are being covered by secondments within the service whilst the Director of People and Culture post is being recruited to.

Environment, Civic Pride & Climate Department – Dan Jones

The use of agency staff is under constant review and where possible appropriate agency positions are being recruited to on a permanent basis. There remain challenges in some areas where agency staff are providing specialist skills or are covering [often short term] externally funded roles including capital schemes. There are several professional areas where there is an extremely competitive market in which all London boroughs are struggling to recruit and retain permanent staff. This includes Traffic engineers, Planning officers and Building control surveyors where the emergence of a strong interim market as well as private sector competition [in building control particularly] has changed employment patterns and our ability to recruit and retain staff.

Alternative options for sourcing non-agency staffing on a medium to long term basis in Highways and Transport are being developed, however value for money will be considered, compared to the current arrangements.

The paused restructure in the Public Places division has meant a number of agency staff have been necessary, however a permanent recruitment is underway for the Head of Waste and Street Environment and other posts will be filled by permanent staff over the next 6 months.

DMT reviews this matter on a regular basis in order to manage risk including the financial impact.,

Finance & Digital – Asad Mushtag

Most of the other agency appointments relate to the IT Transformation project. They are recruited annually, on approval of CMT, to deliver specific priority projects in the forthcoming year.

There are a number of agency-covered roles where there is an active recruitment process to recruit into those posts on a fixed -term basis or permanently to reduce the number of agency staff. It is expected this will have an impact if and when those recruitment campaigns successfully place candidates.

<u>Housing & Sustainable Development – Lucy Owen</u>

The number of agency workers is regularly reviewed at H&SD DMT and with HR colleagues. As a result one of the posts, held by a temporary agency worker, has been converted from temporary to permanent and we continue to pursue this opportunity. We have been awaiting the budget setting process for approval of proposed growth bids in development management which will allow us to turn a number of agency temporary staff into permanent posts, which will happen at the beginning of the next financial year following budget committee, if the growth is approved.

A number of posts are temporary as the work is time limited; a number of these posts are also due to end during this financial year at which time the requirement for the agency staff will end.

2.15 At a previous Standards and General Purposes Committee meeting where the temporary workforce was discussed the Committee requested information on the ability to attract and select Black Asian Multi Ethnic staff. The percentage for the past two quarters 2023/4 is in Appendix 3, showing applications, short-listed and appointments.

There continues to be an improving picture of attracting Black Asian Multi Ethnic candidates with the majority of candidates applying for roles identifying as Black Asian Multi Ethnic, over 66%. This continues at shortlist stage with over 60% of candidates being Black Asian Multi Ethnic candidates. At offer stage 37% of offers in quarter 2 and 58% in quarter 3 were to Black, Asian and Multi Ethnic candidates. Roles at grade MGA and above (jobs with salaries of £50k plus) continue to have a mixed picture with quarter 2 having more applications from Black Asian Multi Ethnic candidates, however the majority of job offers were to white candidates although

- this represents a small number of appointments overall (4). The REN group provide scrutiny of senior appointments and are on interview panels.
- 2.16 The council will continue to focus on talent management using data from the workforce, succession and contingency planning, understanding what talent exists within the organisation and what talent populations are needed. Talent approaches will look outside organisational boundaries and work with diverse talent pools. Our current Change Team has been recruited internally from across the council.
- 2.17 Work has been undertaken to enhance Merton's presence in the recruitment market there is a focus on understanding the candidate experience, using effective assessment and selection approaches and making effective recruitment decisions. Understanding the labour market, Merton's market position and the people proposition and job analysis to ensure roles are engaging to a wide variety of potential candidates. There is a new employer brand for the council and a muchimproved recruitment website and candidate pack Work for Merton | Merton Council. The council's new set of values are promoted through the council recruitment website as well as employee benefits. The website includes welcome videos from both the Chief Executive and Council Leader, there is further detail on apprenticeships, early careers pathways and support provided, leadership roles, adult social care and children's social care.

There is an emphasis on using effective social media channels with a greater use of Linked-In and Indeed to promote Merton council and current roles. Overall, the aim is to put Merton on the map and raise Merton's profile as an employer of choice.

2.18 A review of family friendly policies has been undertaken with a recognition that whilst pay is an important factor for candidates increasingly candidates want to work for an employer who cares about their welfare, provides a work life balance and supports them in other aspects of their life. Benchmarking with London Councils showed that whilst Merton does have existing policies for most aspects some are less generous than other councils. There will be a CMT decision taken on the potential cost of implementing any changes, some will have less cost implications as they will only affect a small percentage of the workforce, whereas policies in relation to caring responsibilities will have a larger impact on the workforce largely due to the demographic. Family friendly policies which will be consulted on with Staffside and discussed with Staff Network Groups include:

Maternity	Surrogacy	Paternity
Fertility Treatment	Neonatal Care	New grandparent leave
Flexible working	Career breaks	Sabbaticals
Adoption		

- 2.19 As well as family friendly polices the council has an HR Equality, Diversity and Inclusion Lead. Staff networks groups are being promoted and created supported by the E, D and I Lead with further development work being undertaken on Disability Confident to move the council to the next level. The council has signed the menopause pledge and is currently working towards achieving Unison's race equality charter. Recruiting managers are required to undertake recruitment training which includes equality, diversity and inclusion and CMT have completed inclusion training prior to interviews for the current leadership vacancies. This will be rolled out across the council.
- 2.20 Specialist head-hunters are engaged for senior appointments through the frameworks available to the Council. All suppliers have a strong track record of being able to attract a diverse pool of candidates to senior roles. For Executive Director and CEO appointments the choice of headhunter is made by the Appointments Committee. Ten senior appointments have been made using executive search agents since April 2022. Forty percent of these have been female appointments. There have been two Black Asian Multi Ethnic appointments made at this senior level.
- 2.21 The current recruitment campaign for leadership roles include the following, with further leadership roles being recruited to in a second tranche:

Executive Director for Children, Lifelong Learning and Families (DCS) - Salary up to £154,500

Director of Public Realm - Salary up to £116,300

Director of People and Culture Change - Salary up to £116,300

Head of Communications and Engagement - Salary up to £84,600

Head of Housing Development - Salary up to £92,900

Head of Sustainable Transport, Highways and Climate - Salary up to £92,900

2.22 The senior pay review has been undertaken and will be implemented from 1 April 2024. This has the benefit of reducing the number of posts covered by expensive interims and tackling recruitment and retention difficulties. There was a concern that pay rates may be adrift from the market and this had resulted in an increasing use of market supplements. This poses service resilience risks with a high proportion of interims at senior level.

The review involved benchmarking Merton salary ranges against other London local authorities with a weighting of results to outer London. The outcome of the review included:

- Analysis of pay gaps and development of new grades and pay scales with "Buy out" of market pay
- Renaming of Assistant Directors to "Directors"

- Emergency planning and election duties included in key accountabilities to third tier roles.
- Roles below Director to move from JNC to NJC terms and conditions.

The existing scales below Assistant Director level, which have two incremental points, are as follows:

Grade	Minimum	Maximum
Management Grade 1	£71,973	£76,578
Management Grade 2	£80,040	£84,564
Management Grade 3	£89,109	£92,943
Management Grade 4 (Assistant Director)	£96,144	£100,239
Management Grade 5 (Assistant Director)	£103,728	£108,300

The new pay scales from 1 April 2024 are as follows:

Grade	Point 1	Point 2	Point 3	Point 4	Point 5
MG1 & MG2	£78,960	£80,520	£82,080	£83,640	£85,200
MG3	£85,200	£87,136	£89,072	£91,007	£92,943
MG4	£101,262	£103,144	£105,026	£106,908	£108,790
MG5	£108,790	£110,672	£112,554	£114,437	£116,319

This model:

- Applies greater weighting to Outer London benchmarks
- Caps any increase for Executive Directors so that it buys out their market pay.
- Preserves the current maximum for grade MG3 (the upper grade of the 3rd tier) which otherwise would have reduced based on benchmarking.

Realigning pay to the market medians will facilitate recruitment and retention of staff and reduce expenditure above budget on agency workers. There will be a cost avoidance achieved by implementing the new senior pay scales and filling the posts with permanent staff, despite substantive grades increasing. The cost avoidance upon implementation of the new pay scale is estimated to be circa £209k per annum. This will increase or reduce over time as and when staff move on to the various increment points of the new scale and is reliant upon all posts being filled with permanent staff as opposed to agency.

2.23 The Establishment Control report is included as Appendix 4, as requested. This is also reported to Financial Management Task Group on 24th February and provides total FTE vacancies by Department and Function along with FTE establishment and FTE's of staff and agency workers. It should be noted that the Finance establishment figure will differ from that held on iTrent as the latter will include grant funded, externally funded and capital funded roles. Departmental managers are responsible for ensuring the establishment data for their areas is correct and receive a monthly report to update with these changes then being implemented on the iTrent payroll system.

3 Timetable

- 3.1 Regular monthly reports of all interim/temporary placements are sent to departments and suitable "challenge" meetings are held with DMTs on a monthly basis. Agency spend and number of agency staff forming part of the workforce are reported to CMT on a monthly basis as part of the HR Metrics. Now that the new executive team are embedded Executive Directors are being asked to review their structures and recruit to any vacancies in their structures on a permanent basis with a concerted effort to reduce their agency headcount. CMT have introduced a weekly challenge meeting for all permanent and temporary proposed recruitment including agency extensions and market supplement application.
- 3.2 We will endeavour to give the most up to date information we have available.

3.3 Financial, resource and property implications

4.1 The aim is to challenge hiring managers' interim/temporary placements and reduce overall costs associated with interim workers where possible, noting that in many cases the Council has to cover statutory functions.

4 Legal and statutory implications

5.1 There are no specific legal implications arising from the report

4.1.1 Human rights, equalities and community cohesion implications

4.2 The amendments that have been made to the Council's HR policies and processes will improve confidence in the Council's HR recruitment procedure and the maintenance of the interim position database to provide the means to ensure compliance with Members' requirements.

5 Crime and Disorder implications

7.1 None

8 Risk management and health and safety implications

8.1 These are detailed in the Ernst and Young report of 12 March 2014 and subsequent reports.

Appendices – the following documents are to be published with this report 9 and form part of the report

- 9.1 Appendix 1 Agency Database

 - Appendix 2 Higher Cost Agency Workers
 Appendix 3 Applications, Shortlisting and Offers
 - Appendix 4 Establishment Control Report

10 **Background papers**

10.1 None By virtue of paragraph(s) 2 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted



By virtue of paragraph(s) 2 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted



Appendix 3 Applications, Shortlisting and Offers

Quarter 2 2023/2024

All Posts

WHITE BACKGROUND

BAME

Applications - 1,655 PREFER NOT TO SAY WHITE BACKGROUND BAME 0% 10% 20% 30% 40% 50% 60% 70% Shortlisted - 346 PREFER NOT TO SAY PREFER NOT TO SAY WHITE BACKGROUND BAME OW 10% 20% 30% 40% 50% 60% 70%

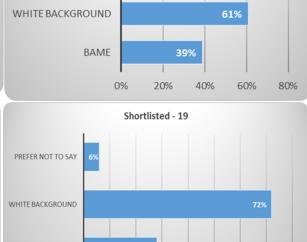
40%

10% 20% 30% 40% 50% 60% 70%

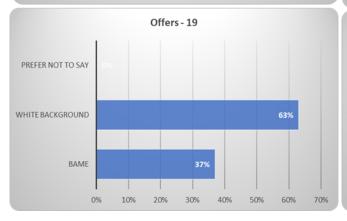
60%

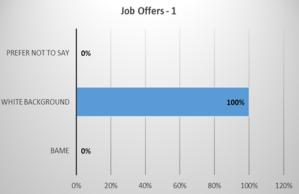
MGA and above

BAME



Applications - 75

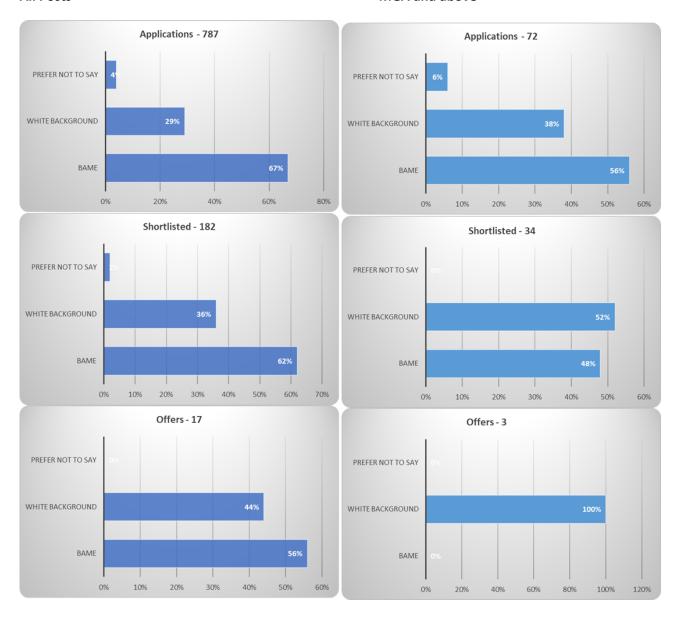




Quarter 3 2023/24

All Posts

MGA and above



As at 31st March 2023

Department	Original Budget FTE	Budget FTE Variance		Employees	iTrent Estab FTE less FTE	FTE vacancies covered by agency workers	Unfilled vacancies
Corporate Services	494.70	92.47	594.17	416.21	177.96	90.00	87.96
Children Schools and Families	532.49	64.81	606.27	467.01	138.26	78.80	60.46
Community and Housing	501.36	19.69	521.05	363.34	157.71	80.00	77.71
Environment and Regeneration	416.89	65.47	482.36	344.43	137.93	86.17	51.76
Total	1945.44	242.44	2203.85	1590.99	611.86	334.97	277.89

As at 31st December 2022

Department	Original Budget FTE	Budget FTE Variance		Employees	Trent Estab	FTE vacancies covered by agency workers	Unfilled vacancies
Corporate Services	494.70	65.31	561.01	410.55	150.46	90.00	60.46
Children Schools and Families	532.49	59.81	592.30	452.39	139.91	76.80	63.11
Community and Housing	501.36	26.66	528.02	371.77	156.25	77.93	78.32
Environment and Regeneration	416.89	58.87	475.76	320.75	155.01	95.97	59.04
Total	1945.44	210.65	2157.09	1555.46	601.63	340.70	260.93

As at 30th September 2022

Department	Original Budget FTE	Budget FTE Variance		Employees	Trent Estab	FTE vacancies covered by agency workers	Unfilled vacancies
Corporate Services	494.70	49.13	544.83	418.48	126.35	79.99	46.36
Children Schools and Families	532.49	58.47	590.96	449.89	141.07	77.80	63.27
Community and Housing	501.36	21.26	522.62	368.10	154.52	75.00	79.52
Environment and Regeneration	416.89	64.77	481.66	313.87	167.79	97.37	70.42
Total	1945.44	193.63	2140.07	1550.34	589.73	330.16	259.57

As at 30th June 2022

Department	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	FTE Employees	iTrent Estab FTE less FTE	covered by agency	Unfilled vacancies
Corporate Services	494.70	37.44	532.14	425.01	107.13	71.95	35.18
Children Schools and Families	532.49	47.30	579.79	438.45	141.34	88.40	52.94
Community and Housing	501.36	30.63	531.99	367.42	164.57	83.00	81.57
Environment and Regeneration	416.89	79.77	496.66	320.90	175.76	109.17	66.59
Total	1945.44	195.14	2140.58	1551.78	588.80	352.52	236.28

As at 31st March 2022

Department	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	Employees	iTrent Estab FTE less FTE	covered by agency	Unfilled vacancies
Corporate Services	507.22	28.22	539.94	425.01	114.93	71.95	42.98
Children Schools and Families	519.65	52.32	571.97	448.71	123.26	93.51	29.75
Community and Housing	489.75	29.99	519.74	367.42	152.32	83.00	69.32
Environment and Regeneration	383.98	114.50	498.48	320.90	177.58	107.17	70.41
Total	1900.60	225.03	2130.13	1562.04	568.09	355.63	212.46

As at 31 March 2021

Department	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	FTE Employees	iTrent Estab FTE less FTE	FTE vacancies covered by agency workers	Unfilled vacancies
Corporate Services	505.25	24.04	532.07	421.97	109.10	62.42	47.68
Children Schools and Families	491.50	67.47	558.97	447.78	111.19	59.60	51.59
Community and Housing	458.40	22.68	481.08	358.90	122.18	68.40	53.78
Environment and Regeneration	387.18	89.57	476.75	324.16	152.59	87.57	65.02
Total	1842.33	203.76	2048.87	1552.81	495.06	277.99	218.07

As at 31 March 2020

Department	Original Budget FTE	Budget FTE Variance		FTE Employees	iTrent Estab FTE less FTE	FTE vacancies covered by agency workers	Unfilled vacancies
Corporate Services	489.82	33.43	523.25	430.05	93.20	58.99	34.21
Children Schools and Families	514.78	38.95	553.73	428.07	125.66	42.50	83.16
Community and Housing	436.67	15.79	452.46	357.05	95.41	50.00	45.41
Environment and Regeneration	373.21	83.18	456.39	318.69	137.70	76.00	61.70
Total	1814.48	171.35	1985.83	1533.86	451.97	227.49	224.48

Column	Explanatory Notes
	The tables have been simplified to focus on FTE establishment, FTE
	employees and agency workers and FTE vacancies - with the aim of
	making them easier to read and understand.
	The data excludes Schools and Apprentices
Budgeted FTE Establishment	The total budget FTE
FTE Employees	Total FTE employees
Vacancies: Budgeted FTE less FTE Employees	Budgeted FTE less FTE employees, i.e. the vacancies before accounting for
FTE vacancies covered by agency workers	Total FTE agency workers
Unfilled vacancies	Total FTE vacancies not filled by an employee or covered by an agency worker

Department / Team	Sub Team (if any)	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	FTE Employees	Vacancies: iTrent Estab FTE less FTE Employees	FTE vacancies covered by agency workers	Unfilled vacancies
Adult Learning		3.75	-0.15	3.60	3.80		0.00	-0.20
Children's Social Care & Youth I	nclusion							
Adolescent and Safeguarding		39.90	4.10	44.00	41.37	2.63	1.00	1.63
Corporate Parenting		60.30	2.70	63.00	54.19	8.81	8.00	0.81
Family Support and Safeguardir	ng	61.00	9.60	70.60	53.89	16.71	8.00	8.71
Help and Family Assessment		51.80	3.00	54.80	32.80	22.00	19.00	3.00
Management		1.00	0.00	1.00	1.00	0.00	0.00	0.00
Children's Social Care & Youth I	nclusion Total	214.00	19.40	233.40	183.25	50.15	36.00	14.15
Education Division								
Contracts and School Organisat	Contracts Management	10.30	-1.90	8.40	7.40	1.00	1.00	0.00
	Schools Admissions	5.10	-0.10	5.00	4.91		0.00	0.09
		0.00	3.00	3.00	2.00		0.00	1.00
Early Years, Family Wellbeing a	Brightwell Team	11.62	3.21	14.83	8.01	6.82	3.00	3.82
, , ,	Children's Centres and Family Hubs	23.00	11.00	34.00	26.29	7.71	2.00	5.71
	Continuous Improvement, Inclusion, Portage and		-12.34	44.11	34.19	9.92	2.00	7.92
	Family Hubs Infrastructure, Information and Tran		4.90	21.61	12.07	9.54	2.00	7.54
	Family Wellbeing Service	25.00	9.43	34.43	29.27	5.16	2.00	3.16
	Management	1.00	2.00	3.00	1.00		0.00	2.00
Education Inclusion	Education Welfare Service	10.49	1.92	12.41	12.26			0.15
	Learning Behaviour & Language Team	20.65	10.58	31.23	30.07	1.16	5.00	-3.84
	MIASS	1.00	1.71	2.71	2.71	0.00	0.00	0.00
	My Futures Team	7.60	1.00	8.60	5.60	3.00	1.00	0.00
	Participation	3.00	0.17	3.17	3.94	-0.77	0.00	-0.77
	Virtual Behaviour Service (Youth Inclusion)	10.75	1.25	12.00	13.00	-1.00	0.00	-1.00
	Youth Service	12.80	4.56	17.36	11.32	6.04	0.00	6.04
	Management	1.00	0.00	1.00	1.00	0.00	0.00	0.00
	Equality & Diversity	3.00	0.50	3.50	3.50	0.00	0.00	0.00
•	Governance Team	2.81	0.19	3.00	3.00	0.00	0.00	0.00
	MSI Business Support Team	1.80	0.00	1.80	1.80	0.00	0.00	0.00
	Schools ICT Support	5.52	1.08	6.60	5.00	1.60	2.00	-0.40
	Strategic School Improvement	6.40	2.80	9.20	5.00	4.20	0.00	4.20
	Virtual School	6.37	1.60	7.97	6.80	1.17	0.00	1.17
	Management	1.00	3.23	4.23	2.00	2.23	1.00	1.23
SENDIS Service	Assesment, Planning and Resource Team	12.10	3.50	15.60	11.37	4.23	0.00	4.23
	Educational Psychology Service	19.20	0.38	19.58	17.60		0.00	1.98
	SEND Team	19.00	13.90	32.90	28.00	4.90	6.00	-1.10
	Sensory Impairment Service	5.00	0.13	5.13	4.00	1.13	1.17	-0.04
	Management	4.00	0.00	4.00	4.00	0.00	0.00	0.00
	Management	0.00	1.00	1.00	1.00	2.00	0.00	0.00
Education Division Total		302.67	68.70	371.37	298.12	75.25	28.17	43.08
Strategy, Commissioning & Part	tnerships							
Integrated Children's Commissi	-	2.60	8.37	10.97	5.97	5.00	1.00	4.00
	. *	4.00	-2.00	2.00	2.00			0.00
	Peformance Analysis	7.73	-0.07	7.66	6.60		0.00	1.06
	Policy and Partnerships	2.00	3.90	5.90	5.50		0.00	0.40
	Management	1.00	1.00	2.00	2.00	0.00	1.00	-1.00
		0.00	6.00	6.00	2.00	2.00	1.00	3.00
Strategy, Commissioning & Part		14.73	8.83	34.53	24.07	8.46	3.00	7.46
Management & Exec Assistant	· _							
Management & Exec Assistant		2.00	0.00	2.00	1.00	1.00	0.00	1.00
Management & Exec Assistant		2.00	0.00	2.00	1.00	1.00	0.00	1.00
munagement & LACL Assistant	lotui	2.00	0.00	2.00	1.00	1.00	0.00	1.00

APPENDIX A VACANCY DATA FOR MERTON - as at 31st December 2023

Department / Team	Sub Team (if any)	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	FTE Employees	Vacancies: iTrent Estab FTE less FTE Employees	FTE vacancies covered by agency workers	Unfilled vacancies
Adult Social Care								
Adult Social Care	Commissioning & Market Development	10.00	32.00		29.91		3.00	
_	Long Term Services	31.51	7.02		21.39			5.21
	Operations	185.16	-16.39		120.27			13.58
	Management	7.00	0.00	7.00	5.00	2.00	2.00	0.00
Adult Social Care Total		233.67	22.63	256.30	176.57	79.73	51.85	27.88
C&H Strategy & Improvement								
		5.00	7.40	12.40	0.00	12.40	3.00	9.40
C&H Strategy & Improvement		5.00	7.40	12.40	0.00	12.40	3.00	9.40
Provider Services								
All Saints/High Path Day Centre	All Saints	9.52	-0.52	9.00	8.66	0.34	0.00	0.34
-	High Path	10.39	-1.68	8.71	8.31	0.40	0.00	0.40
			1.00	1.00	1.00	0.00	0.00	0.00
Jan Malinowski/Eastways Centre	Eastways Day Centre	11.29	-0.79	10.50	9.70	0.80	0.00	0.80
-	Jan Malinowski Centre	30.26	0.86	31.12	21.59	9.53	0.00	9.53
			1.00	1.00	1.00	0.00	0.00	0.00
Supported Living/Mascot/Glebelands	Glebelands	19.35	-4.38	14.97	10.94	4.03	0.00	4.03
	Mascot	19.89	1.28	21.17	16.06	5.11	0.00	5.11
	Support Living Services	35.61	-3.81	31.80	23.97	7.83	0.00	7.83
P:			1.00	1.00	1.00	0.00	0.00	0.00
Meagowsweet/Riverside	Meadowsweet	10.49	-2.49	8.00	6.00	2.00	0.00	2.00
)e	Riverside Drive	13.16	-5.95		1.74		0.00	5.47
→			1.57	1.57	1.86	-0.29	0.00	-0.29
Mer (Employment Team		2.93	2.07		5.80		0.00	
Service Provision Business Support		3.60	3.40		2.60			4.40
Provider Services	Management		1.00			0.00	0.00	
Provider Services Total		166.50	-6.45	160.05	121.23	38.82	0.00	38.82
Public Health Team								
Public Health Team		20.51	8.30	28.81	10.89	17.92	7.87	10.05
Public Health Team Total		20.51	8.30	28.81	10.89	17.92	7.87	10.05
Management								
Management		3.00	-1.00	2.00	1.00	1.00	0.00	1.00
Management Total		3.00	-1.00	2.00	1.00	1.00	0.00	1.00
Grand Total Community & Housing		428.68	30.88			149.87		

INNOVATION AND CHANGE

APPENDIX A VACANCY DATA FOR MERTON - as at 31st December 2023

	Sub Team (if any)	Budget FTE	Variance	iTrent FTE Establishment	FTE Employees	Vacancies: iTrent Estab FTE less FTE Employees	FTE vacancies covered by agency workers	Unfilled vacancies
Chief Exec - Management		2.06						
Chief Exec - Management Total		2.06	-0.06	2.00	1.00	1.00	0.00	1.00
Corporate Governance								
Democracy and Electoral Service	es	11.94	2.06	14.00	10.94	3.06	2.00	1.06
Leaders Office		6.00		6.00	5.00		0.00	
South London Legal Partnership		150.01	33.64	183.65	114.81	68.84	28.00	
Management		1.00	0.00	1.00	1.00	0.00	2.00	
Corporate Governance Total		168.95	35.70	204.65	131.75	72.90	32.00	40.90
Customers, Policy and Improve	ment							
Continuous Improvement		4.00	2.00	6.00	2.00	4.00	2.00	2.00
Customer Contact & Communic	Communications	12.50	6.77	19.27	7.50	11.77	5.97	5.80
	Complaints	5.96	2.54	8.50	6.24	2.26	0.00	2.26
	Customer Contact	33.73	3.60	37.33	22.34		5.00	
		1.00	0.00	1.00	1.00	0.00	0.00	0.00
Executive Assistants		0.00	6.06	6.06	6.00	0.06	0.00	0.06
Policy Strategy & Partnerships		9.80	0.00	9.80	4.80	5.00	1.00	
Management		1.00	6.00	7.00	2.00	5.00	0.00	5.00
Customers, Policy and Improve	ment Total	67.99	26.97	94.96	51.88	43.08	13.97	29.11
Human Resources								
Human Resources	Advice and Consultancy	8.62	-0.12	8.50	7.47	1.03	0.00	1.03
	Employee Relations, Pay and Rewards	2.80	0.98	3.78	2.78	1.00	1.00	0.00
	HR Processing and Support	5.30	2.00	7.30	6.30	1.00	0.00	1.00
	Organisational Development & HR Strategy	13.00	-2.00	11.00	8.71	2.29	1.00	1.29
	Recruitment	3.00	4.00	7.00	5.00	2.00	0.00	2.00
	Staff Side - Merton	4.22	-0.29	3.93	4.00		0.00	
	Management	2.00	1.00	3.00	1.00	2.00	0.00	2.00
HR Total		38.94	5.57	44.51	35.26	9.25	2.00	7.25
Management								
Management		1.00	0.00	1.00	1.00	0.00	0.00	0.00
Management Total		1.00	0.00	1.00	1.00	0.00	0.00	0.00
Grand Total		278.94	68.18	347.12	220.89	126.23	47.97	78.26

Department / Team	Sub Team (if any)	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	FTE Employees	Vacancies: iTrent Estab FTE less FTE Employees	FTE vacancies covered by agency workers	Unfilled vacancies
Infrastructure & Technology								
Business Systems Team		27.70	12.90	40.60	23.60	17.00	10.00	7.00
Client Financial Affairs Team		5.8	-1.09	4.71	5.00	-0.29	0.00	-0.29
Commercial Services		6.85	6.15	13.00	11.86	1.14	0.00	1.14
IT Service Delivery	Business Development and Projects	3.00	-1.00	2.00	1.00	1.00	0.00	1.00
	IT Customer Support & Services	12.00	1.00	13.00	8.00	5.00	4.00	1.00
	IT Operations	11.00	5.00	16.00	9.00	7.00	11.00	-4.00
	Management	4.00	1.00	5.00	2.00	3.00	2.00	1.00
Safety Services		3.00	-3.00	0.00	0.00	0.00	0.00	0.00
Transactional Services	Trans Services (Accounts)	5.00	0.00	5.00	5.00	0.00	0.00	0.00
	Trans Services (Care First)	2.60	0.00	2.60	2.60	0.00	0.00	0.00
	Vendor Maintenance Officer	1.43	0.28	1.71	1.43	0.28	0.00	
	Management	1.00	0.00	1.00	1.00	0.00	0.00	
Management		2.00	0.00	2.00	2.00	0.00	0.00	
Infrastructure & Technology Total		85.38	21.24	106.62	72.49	34.13	27.00	7.13
Resources								
Accountancy	Budget Team	12.60	4.40	17.00	11.60	5.40	1.00	4.40
	Service Financial Adviser CSF	4.57	-0.04	4.53	3.57	0.96	1.00	-0.04
	Management	1.00	0.00	1.00	1.00	0.00	0.00	0.00
Financial Strategy and Capital		8.80	1.20	10.00	6.80	3.20	1.00	
Revenues	Bailiffs	12.18	2.42	14.60	11.19	3.41	0.00	3.41
	Council Tax Incl R&B	1.00	0.00	1.00	1.00	0.00	0.00	
	Council Tax Incl R&B Team 2	21.64	-1.14	20.50	19.10	1.40	0.00	-
	Debt Recovery Team	29.85	-18.05	11.80	11.80	0.00	0.00	0.00
	Management			1.00	1.00	0.00	0.00	
Benefits	HB Support	11.80	-1.86	9.94	8.00	1.94	0.00	
	Housing Benefits Incl Appeals	7.80	24.17	31.97	27.27	4.70	1.00	
	Management		1.00	1.00	1.00	0.00	0.00	
Revenues and Benefits	Management & Support	2.00	-2.00	0.00	0.00	0.00	0.00	
Treasury & Insurance		3.00	1.00	4.00	4.00	0.00	0.00	
	Corporate Accountancy	8.20	1.30	9.50	6.63	2.87	1.00	
Management	Management	2.00	0.00	2.00	2.00	0.00	0.00	
Resources Total		126.44	12.40	139.84	115.96	23.88	5.00	18.88
Management								
Management		1.00	0.00	1.00	1.00	0.00	1.00	-1.00
Management Total		1.00	0.00	1.00	1.00	0.00	1.00	-1.00
Grand Total		212.82	33.64	247.46	189.45	58.01	33.00	25.01

Department / Team	Sub Team (if any)	Original Budget FTE	Budget FTE Variance	iTrent FTE Establishment	FTE Employees	Vacancies: iTrent Estab FTE less FTE	FTE vacancies covered by agency workers	Unfilled vacancies
Housing Services								
Housing Needs	Advice & Options	15.00	-1.50	13.50	11.00	2.50	7.00	-4.50
	Development	4.18			4.86	0.14	0.00	
	Environmental Health (Housing) Team	8.23	-0.43		4.00			
	Housing Strategy	6.00	-3.00	3.00	1.00	2.00	1.00	
	Management		10.00	10.00	8.00	2.00	0.00	2.00
Housing Services Total		33.41	5.89	39.30	28.86	10.44	9.00	1.44
Sustainable Communities								
Business Performance								
(Sustainable								
Communities)	Business Performance	1.00	0.57	1.57	1.00	0.57	0.00	0.57
Development Control	Admin & Finance	5.60	0.40	6.00	4.60	1.40	1.00	0.40
	Building Control	6.00	5.61	11.61	7.00	4.61	2.00	2.61
	Enforcement	7.00	-1.50	5.50	2.00	3.50	4.00	-0.50
	Planning Mitcham & Morden	8.90	2.10	11.00	10.20	0.80	1.00	-0.20
	Planning Wimbledon	3.00	3.00	6.00	4.70	1.30	2.00	-0.70
	Management	1.00	0.60	1.60	1.00	0.60	0.60	0.00
Property Management	Estates (Property Management)	2.00	1.00	3.00	1.00	2.00	0.00	2.00
	Finance & Admin (Property Management)	1.00	0.60	1.60	1.00	0.60	0.00	0.60
	Management -	1.00	0.00	1.00	1.00	0.00	0.00	0.00
Management	Management	2.00	-2.00	0.00	0.00	0.00	0.00	0.00
Sustainable Communities	Total	38.5	10.38	48.88	33.50	15.38	10.60	4.78
Management								
Management		2	-1.00	1.00	1.00	0.00	0.00	0.00
Management Total		2	-1	1.00	1.00	0.00	0.00	0.00
Grand Total		73.91	15.27	89.18	63.36	25.82	19.60	6.22

Department / Team Sub Team (if any) Department Team Tea							Vacancies:	FTE vacancies	
Pacifities Management Compiliance and Maintenance 8.10 1.00 3.10 6.56 2.14 1.00 3.11	Denartment / Team	Sub Team (if any)	Original	Budget FTE	iTrent FTE	FTE			Unfilled
Facilities Management Compilance and Maintenance	Department / Team	oub ream (ii any)	Budget FTE	Variance	Establishment	Employees		•	vacancies
Energy and Sustainability	Facilities Management	Compliance and Maintenance	8.10	1.00	9.10	6.96			1.14
Facilities	_	•							
Major Projects		· ·							
Post & Print									
Mary Service Mary			12.33	0.10	12.43				
Ubraries, Heritage Service Ubrary Service Heritage Centre 1.00 0.50 1.50 1.00 0.50 1.20 0.00		Management	1.00	0.00	1.00	1.00	0.00	0.00	0.00
Ubraries, Heritage Service Ubrary Service Heritage Centre 1.00 0.50 1.50 1.00 0.50 0.00	Facilities Management Tot	al	34.03	0.10	34.13	24.49	9.64	2.00	7.64
Ubraries Pervice									
Mitcham Library		Heritage Centre	1.00	0.50	1.50	1.00	0.50	0.00	0.50
Morden Library 5.46 0.00 5.46 5.46 0.00	1 '								1
Pollards Hill & Colliers Wood Library 3.30 -0.23 3.57 3.80 -0.23 0.00 -0.25 Rayner Park & West Barnes Library 2.00 -0.50 1.50 1.50 0.00 0.00 0.00 Service Development 1.50 0.50 2.00 2.00 0.00 0.00 0.00 0.00 Service Development 1.50 0.50 2.00 2.00 0.00 0.00 0.00 0.00 Wirnbledon Library 7.45 -0.02 7.43 8.44 -1.01 0.00 0.00 0.00 Merton Art Space Project 1.50 1.50 0.00 0.00 0.00 0.00 0.00 Merton Art Space Project 3.10 8.24 3.35 3.37 0.47 0.00 0.00 0.00 Public Protection 3.10 8.24 3.35 3.37 0.47 0.00 0.00 Public Protection 7.00 7.00 7.00 7.00 0.00 0.00 0.00 0.00 Public Protection 8.71 0.50 92.16 76.84 15.32 15.00 0.32 Regulatory Services Parting Services 8.71 0.50 92.16 76.84 15.32 15.00 0.32 Regulatory Services Parting Administration and Finance 0.00		-							
Raynes Park & West Barnes Library 3,27 0,01 3,28 4,27 0,99 0,00		Pollards Hill & Colliers Wood Library	3.80	-0.23	3.57	3.80	-0.23	0.00	
Resources Team		Raynes Park & West Barnes Library	3.27	0.01	3.28	4.27	-0.99	0.00	
Wimbledon Library			2.00	-0.50	1.50	1.50	0.00	0.00	
Merton Art Space Project		Service Development	1.50	0.50	2.00	2.00	0.00	0.00	0.00
Dibraries, Heritage Service Total 31.08 2.46 33.54 33.07 0.47 0.00 0.00 1.01		Wimbledon Library	7.45	-0.02	7.43	8.44	-1.01	0.00	-1.01
Libraries, Heritage Service Total San		Merton Art Space Project	1.50	-1.50	0.00	0.00	0.00	0.00	0.00
Public Protection Parking Services Parking Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking & Carty Services Parking Service			2.00	3.00	5.00	4.00	1.00	0.00	1.00
Parking & CCTV Services		Total	31.08	2.46	33.54	33.07	0.47	0.00	0.47
Regulatory Services Partnet Administration and Finance 0.00	Public Protection								
Business Development									
Commercial Services 51.55 7.38 58.93 33.81 25.12 14.00 11.1 Operational and Technical Support Team 26.10 0.80 26.90 25.40 1.50 0.00 1.5 Residential & Pollution Services 31.10 36.90 68.00 48.90 19.10 6.40 12.7 Management 1.00 0.00 1.00 1.00 0.00 0.00 0.00 Safer Merton CCTV 8.80 0.200 10.00 10.00 0.00 0.00 0.00 0.00 The same of th	Regulatory Services Partne								
Operational and Technical Support Team 26.10 0.80 26.50 25.40 1.50 0.00 1.50 Residential & Pollution Services 31.10 36.90 68.00 48.90 19.10 6.40 12.70 1.50	inegulatory services rartife	-							.
Residential & Pollution Services 31.10 36.90 68.00 48.90 19.10 6.40 12.70 Management 1.00 0.00 1.00 1.00 1.00 0.									
Safer Merton CCTV		•							
Safer Merton CCTV									
Management Man									
Management Man	Safer Merton	CCTV							
Public Realm Contracting and Commissioning	D.C. and an an an a	Managana							
Public Realm Contracting and Commissioning Leisure & Culture Develop Leisure & Support Services 3.00 0.80 3.80 2.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00		iwanagement							
Leisure & Culture Develop Leisure Support Services 3.00 0.80 3.80 2.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00 1.80 0.00 0		and Commissioning	225./5	52.84	2/8.59	209.35	69.24	39.40	29.84
Mimbledon Park Watersports Centre 3.00 6.00 9.00 4.60 4.40 0.00 4.40 4.40 0.00 4.44 4.40 0.00 4.44 4.40 0.00 4.44 4.40 0.00			1 0.00		2.00	1 0.00	1 4.00	1 0.00	1 400
Leisure & Culture Greenspane Arboricultural 3.00 0.00 3.00 1.00 0									
Leisure & Culture Greensp Arboricultural 3.00 0.00 3.00 1.00 2.00 2.00 0.00		•							
Events 0.00 1.40 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00 1.40 0.00									
Greenspaces Development 4.60 2.70 7.30 5.00 2.30 0.00 2.30	Leisure & Culture Greensp								
Mitcham Common 0.00 2.00 2.00 2.00 0.00 0.00 0.00 Waste Engagement & Enforcement and Inspection 1.00 1.00 1.00 2.00 1.00 1.00 1.00 0.00 1.00 Waste Services Finance & Administration Support 2.00 -1.00 1.00 1.00 0.00 0.00 0.00 Waste Services Finance and Performance 2.00 0.00 2.00 1.00 1.00 0.00 0.00 1.00 Finance Service Development & Strategy 2.69 1.00 3.00 3.00 1.00 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00									
Management 1.00 0.00 1.00 1.00 0									
Waste Engagement & Enfo Community Waste Partnerships 1.00 1.00 2.00 1.00 1.00 0.00 1.00 Enforcement and Inspection 6.00 1.00 7.00 2.70 4.30 0.00 4.3 Waste Services Finance & Administration Support 2.00 0.00 2.00 1.00 1.00 0.00 0.00 1.00 Finance and Performance 1.90 1.10 3.00 0.00 3.00 1.00 2.00 1.00 2.00 1.00 2.00 1.00 2.00 3.00 1.00 3.00 1.00 2.00 3.00 1.00 3.00 1.00 3.00 1.00 2.00 3.00 3.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 3.69 0.00 1.00 0.00 1.00 0.00 1.00 0.00 1.00 0.00 1.00 0.00 3.69 0.00 3.69 <									
Enforcement and Inspection 6.00 1.00 7.00 2.70 4.30 0.00 4.30 2.00 4.30 2.00 -1.00 1.00 1.00 1.00 0.00	Waste Engagement & Enfo	<u> </u>							
Maste Services Finance & Administration Support 2.00 0.00 2.00 1.00 1.00 0.00 0.00 1.00	Waste Engagement & Emo								
Waste Services Finance & Administration Support 2.00 0.00 2.00 1.00 1.00 0.00 1.00 Finance and Performance 1.90 1.10 3.00 0.00 3.00 1.00 2.00 Service Development & Strategy 2.69 1.00 3.69 0.00 3.60 1.00 0.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00									
Finance and Performance 1.90 1.10 3.00 0.00 3.00 1.00 2.00	Waste Services	Finance & Administration Support							
Service Development & Strategy 2.69 1.00 3.69 0.00 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.69 3.			+						
Training and Road Safety 0.80 0.20 1.00 0.00 1.00 0.00 1									_
Transport and Operations 37.45 8.48 45.93 35.03 10.90 2.57 8.3 Management 0.00 3.00 3.00 1.00 2.00 0.00 2.0 Management 5.00 8.63 13.63 7.71 5.92 5.00 0.9 Public Realm Contracting and Commissioning 74.44 36.31 110.75 66.04 44.71 10.57 34.1 Management		<u>·</u>	_			!			
Management 0.00 3.00 3.00 1.00 2.00 0.00 2.00 Management 5.00 8.63 13.63 7.71 5.92 5.00 0.9 Public Realm Contracting and Commissioning 74.44 36.31 110.75 66.04 44.71 10.57 34.1 Management 44.71 44.71 10.57 34.1			37.45			35.03	10.90	2.57	
Public Realm Contracting and Commissioning 74.44 36.31 110.75 66.04 44.71 10.57 34.1 Management		Management	0.00					0.00	2.00
Management	Management		5.00	8.63	13.63	7.71	5.92	5.00	0.92
	Public Realm Contracting a	and Commissioning	74.44	36.31	110.75	66.04	44.71	10.57	34.14
	Management								
	Management		2	-1.00	1.00	1.00	0.00	0.00	0.00

Management Total	2	-1	1.00	1.00	0.00	0.00	0.00
Grand Total	367.30	90.71	458.01	333.95	124.06	51.97	72.09

Department / Team

Future Merton Total

futureMerton

Grand Total

Sub Team (if any)

Commissioning

Infrastructure

Programming

Management

Economy

7.77

5.46

24.50

13.51

3.00

54.24

54.24

FTE

16.04

10.69

30.50

24.00

4.00

85.23

85.23

Employees

Budget FTE iTrent FTE

7.60

6.69

7.50

5.14

2.00

28.93

28.93

Establishment

Variance

Original

Budget FTE

8.44

4.00

23.00

18.86

2.00

56.3

56.30

Vacancies:

less FTE

iTrent Estab FTE covered by

8.27

5.23

6.00

1.00

30.99

30.99

10.49

FTE vacancies

Unfilled

3.00

0.00

5.00

3.00

0.00

11.00

11.00

vacancies

5.27

5.23

1.00

7.49

1.00

19.99

19.99

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Standards and General Purposes Committee Forward work plan

June/July

- Annual Governance Statement
- Internal Audit Annual Report
- Fraud Update report
- Annual Report of Standards and General Purposes Committee
- Complaints Report including complaints against Members
- Work Programme

September

- HR Update- Temporary and Contract Staff and Demographics update
- Independent/Co-opted Members
- Work programme

November

- External Audit progress reports
- Internal Audit progress report
- Final Accounts
- Fraud Update Report
- Annual Gifts and Hospitality report (members)
- Annual Gifts and Hospitality report (officers)
- Annual review of Risk management Strategy and Strategic Risk register
- Annual Complaints Report
- Work programme

March

- External Audit progress report
- External Audit Plans for Council and Pension Fund accounts
- Internal Audit Plan
- Internal Audit progress report
- Update on RIPA authorisations
- HR update report -Temporary and Contract Staff update
- Work programme

Add as required:

- Polling Places (last done February '24)
- Constitutional amendments
- Review of members' interests
- Member Development Update
- Independent / co-opted members
- Reports on dispensations issued by Monitoring Officer
- Report on payment exceeding £1000 as a result of maladministration as directed by the LGO.
- Revisions to Contract Standing Orders (last done July '23)
- Freedom of the Borough (recommendations from working group)