

Thurrock - An ambitious and collaborative community which is proud of its heritage and excited by its diverse opportunities and future

## **Standards and Audit Committee**

The meeting will be held at 7.00 pm on 8 July 2021

Council Chamber, Civic Offices, New Road, Grays, Essex, RM17 6SL

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#### Membership:

Councillors Cathy Kent (Chair), Graham Snell (Vice-Chair), Adam Carter, Gary Collins, Augustine Ononaji and Kairen Raper

Lisa Laybourn - Co-opted Member

#### Substitutes:

Councillors John Kent, Shane Ralph, Sue Sammons and David Van Day

#### Agenda

Open to Public and Press

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To approve as a correct record the minutes of the Standards and Audit Committee meeting held on 11 March 2021.

#### 3 Items of Urgent Business

To receive additional items that the Chair is of the opinion should be considered as a matter of urgency, in accordance with Section 100B (4) (b) of the Local Government Act 1972.

### 4 Declaration of Interests

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## **Queries regarding this Agenda or notification of apologies:**

Please contact Jenny Shade, Senior Democratic Services Officer by sending an email to Direct.Democracy@thurrock.gov.uk

Agenda published on: 30 June 2021

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#### DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF

Breaching those parts identified as a pecuniary interest is potentially a criminal offence

#### **Helpful Reminders for Members**

- Is your register of interests up to date?
- In particular have you declared to the Monitoring Officer all disclosable pecuniary interests?
- Have you checked the register to ensure that they have been recorded correctly?

#### When should you declare an interest at a meeting?

- What matters are being discussed at the meeting? (including Council, Cabinet, Committees, Subs, Joint Committees and Joint Subs); or
- If you are a Cabinet Member making decisions other than in Cabinet what matter is before you for single member decision?



#### Does the business to be transacted at the meeting

- relate to; or
- · likely to affect

any of your registered interests and in particular any of your Disclosable Pecuniary Interests?

Disclosable Pecuniary Interests shall include your interests or those of:

- · your spouse or civil partner's
- a person you are living with as husband/ wife
- a person you are living with as if you were civil partners

where you are aware that this other person has the interest.

A detailed description of a disclosable pecuniary interest is included in the Members Code of Conduct at Chapter 7 of the Constitution. Please seek advice from the Monitoring Officer about disclosable pecuniary interests.

What is a Non-Pecuniary interest? – this is an interest which is not pecuniary (as defined) but is nonetheless so significant that a member of the public with knowledge of the relevant facts, would reasonably regard to be so significant that it would materially impact upon your judgement of the public interest.

#### **Pecuniary**

If the interest is not already in the register you must (unless the interest has been agreed by the Monitoring Officer to be sensitive) disclose the existence and nature of the interest to the meeting

If the Interest is not entered in the register and is not the subject of a pending notification you must within 28 days notify the Monitoring Officer of the interest for inclusion in the register

Unless you have received dispensation upon previous application from the Monitoring Officer, you must:

- Not participate or participate further in any discussion of the matter at a meeting;
- Not participate in any vote or further vote taken at the meeting; and
- leave the room while the item is being considered/voted upon

If you are a Cabinet Member you may make arrangements for the matter to be dealt with by a third person but take no further steps

#### Non- pecuniary

Declare the nature and extent of your interest including enough detail to allow a member of the public to understand its nature

You may participate and vote in the usual way but you should seek advice on Predetermination and Bias from the Monitoring Officer.

## **Our Vision and Priorities for Thurrock**

An ambitious and collaborative community which is proud of its heritage and excited by its diverse opportunities and future.

- 1. **People** a borough where people of all ages are proud to work and play, live and stay
  - High quality, consistent and accessible public services which are right first time
  - Build on our partnerships with statutory, community, voluntary and faith groups to work together to improve health and wellbeing
  - Communities are empowered to make choices and be safer and stronger together
- 2. **Place** a heritage-rich borough which is ambitious for its future
  - Roads, houses and public spaces that connect people and places
  - Clean environments that everyone has reason to take pride in
  - Fewer public buildings with better services
- 3. **Prosperity** a borough which enables everyone to achieve their aspirations
  - Attractive opportunities for businesses and investors to enhance the local economy
  - Vocational and academic education, skills and job opportunities for all
  - Commercial, entrepreneurial and connected public services

# Minutes of the Meeting of the Standards and Audit Committee held on 11 March 2021 at 7.00 pm

Present: Councillors David Potter (Vice-Chair), Gary Collins and

Cathy Kent

Lisa Laybourn, Co-opted Member

**Apologies:** Councillor Gerard Rice

In attendance: Sean Clark, Corporate Director of Finance, Governance and

Property

Gary Clifford, Chief Internal Auditor

Lee Henley, Strategic Lead, Information Management David Kleinberg, Assistant Director for Counter Fraud &

Investigations

Andy Owen, Corporate Risk and Insurance Manager

Jonathon Wilson, Assistant Director, Finance

Lisa Clampin, Binder Dijke Otte (BDO) Representative Matthew Weller, Binder Dijke Otte (BDO) Representative

Jenny Shade, Senior Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting was being live streamed to the Council's online webcast channel.

In the absence of Councillor Rice, Councillor Potter chaired the meeting.

#### 74. Minutes

The minutes of the Standards and Audit Committee held on the 24 November 2020 were approved as a correct record.

#### 75. Items of Urgent Business

There were no items of urgent business.

#### 76. Declaration of Interests

There were no declarations of interest.

#### 77. External Audit Plan 2020/21

Jonathan Wilson briefed members by stating that two external reports would be presented this evening. The External Audit Plan would set the scene for this year's audit and would set out the planned work of the financial statements audit and the planned work on the use of resource assessment. The Annual Audit Letter followed on from the Audit Completion report and summarised the finding from the 2019/20 audit. Jonathan Wilson stated that BDO would take Members through their planning report but noted that the work on the approach to use of resources was changing this year and the final approach had not yet been agreed. The report also sets out the fee plan for the current year which was very much in line with the previous year. The audit plan sets out a number of risks and the officer response has been covered in the covering report.

Matthew Weller, BDO, took Members through some of the key points of the report:

- Materiality The figure of £7,800,000 was in line with the previous year but would be adjusted on receipt of the draft financial statements for audit.
   So for the purpose of planning the previous year's figure was being used.
- Audit Risk Overview The risks were the same risks raised last year with nothing new in the report when compared to last year. The valuation of financial instruments had risen as a normal risk last year had been increased to a significant risk this year due to the great amount of focus that was planned to be put on this area.
- Not aware of any fraud.
- Two new auditing standards had been set out which would be applicable from this year. The first was in respect of going concern and the second in respect of accounting estimates – which would mean they would need to perform more work this year than what had been undertaken in the past. In a good position to complete that work without any difficulties.
- Confirmed no Independence issues.

Councillor Collins raised a typographic mistake on page 17 of the agenda, paragraph 3.1 where the word should read "noting" and not "nothing".

With no further questions or comments, Councillor Potter moved to the recommendation.

#### **RESOLVED**

That Standard and Audit Committee noted the report.

#### 78. Thurrock Annual Audit Letter 2019/20

Jonathan Wilson presented the report that summarised the work that been undertaken on the 2019/20 audit of which most had been largely reported at the previous audit committee in November.

Jonathan Wilson stated that BDO would take Members through the appendix to which Lisa Clampin stated the report was a public facing summary of all the items reported during the course of the audit of 2019/20 financial year. Members were referred to the following areas:

- Executive Summary, Audit Conclusions confirmed that there had been an unqualified opinion on the financial statements and an unmodified conclusion on the use of resources.
- Reporting and Fees Proposed Amendment The small note number 1 stated that the fee variation would require the approval of PSAA. Members were informed that approval from PSAA had been received for that £5,000.
- Reporting and Fees Housing benefit subsidy claim The small note number 2 stated work was ongoing. Members were informed that work had now been completed and was now subject to Lisa Clampin's review. This would be reported on within the next report brought to committee.

Councillor Collins stated on page 69 of the agenda, Proposed Amendment – the small note number 1 referred to "group companies" and asked for clarification on who these companies were. Lisa Clampin stated were two owned subsidiaries of Thurrock Council, Housing Thurrock Regeneration Limited and Thurrock Regeneration Housing Limited. As these were wholly owned subsidiaries of the Council, the Council consolidated the transactions into the account of those two companies into its own group accounts so a piece of work called Group Consolidation Work was being undertaken as part of the audit to ensure that the consolation process was accurate and that was what the £5,000 related to. Councillor Collins questioned how much money or turnover these two companies generated per year. Jonathan Wilson stated he did not have figures to hand but would be happy to send to Councillor Collins if he so wished to see them. This was a rental stream, largely the source of finance for Thurrock Regeneration Housing Limited which was around 102 houses and from the rental income of those. The construction of those properties by Thurrock Regeneration Limited and then housing was then passed over to Thurrock Regeneration Housing Limited where the income accrued.

Councillor C Kent referred to page 67 of the agenda – Financial Statements – Valuation of Pension Liability and asked for clarification on what had been referred to as a significant risk as it involved a high degree of estimation. Lisa Clampin stated that the valuation of pension liability was dependent on a number of assumptions and a very small change in one assumption could make a material change in the value. It was to highlight that this particular figure was subject to a number of judgements that were made by an expert but a very small change in those assumptions could create a major difference in what was reported in the accounts. Sean Clark reassured Members that the pension fund balance was provided by Essex county council and any changes to the assumptions would have no immediate impact on the Council's bottom line in terms of useable even if there were changes.

Councillor C Kent referred to page 68 of the agenda – Use of Resources – The Council will need to deliver its savings and achieve income targets to maintain financial substantiality in the medium term and there was a risk that these projects would not be met and result that the Council had not produced a plan for closing the budget gaps that had been identified from the revised MTFS. Councillor C Kent questioned whether the Council had got any closer

to closing the gap for 2022, 2023, 2024 and what work had been undertaken. Sean Clark stated that all directorates were currently reviewing the services they carry out at the moment in terms of assets and how they carry those out, what they use and whether any new technology could be used to streamline costs. It had been made clear in the MTFS, at Corporate Overview and Scrutiny Committee and in budget papers that the Council were looking at a number of areas including overall staffing levels and assets used. The process was underway and aimed to bring a paper to Cabinet in June, then go through overview and scrutiny in June / July to make a final determination of budget approaches by the end of July. This would allow several months to carry out any relevant consultations where necessary and then be able to implement changes as required. Sean Clark stated that this was the timetable that was currently being drafted out.

#### **RESOLVED**

That Standards and Audit Committee considered the comments of our external auditors as set out in the attached report and noted their findings.

At 7.28pm, Lisa Clampin left the meeting.

#### 79. Mid-Year Complaints & Enquiries Report - April 2020 - September 2020

Lee Henley presented the report that set out the Council's complaints statistics for the period April 2020 to September 2020 with the number of complaints received for the reporting period being 520 and compared to the same period last year had represented a reduction in the number of complaints received. That a total of 155 MP enquiries had been received, of which 89% had been responded to within the timeframe with the volume of member enquiries received into the Council had remained high and was increasing. A total of 2018 member enquiries had been received within the reporting period, with 95% responded to within timeframe. The Council had also received 402 external compliments within the reporting period compared to 281 during last year.

Councillor Potter raised his concerns with complaints from residents who had used the online report function but were not happy with the response and questioned whether this was due to staff working from home who may not be having the same interaction. Councillor Potter continued to state that Thurrock residents were his main priority and this should remain as a firm footing for the future. Lee Henley stated that 99% of complaints came through the digital channel and when residents were not happy with their complaint response this would be escalated in-line with the complaints process. Lee Henley stated the issue he was referring to was encouraging residents to raise any service requests via our on-line facilities, as in-dong so they should receive a quicker response to that of a member enquiry.

Councillor Collins congratulated officers on the compliments received.

Councillors Collins stated that Members were the first port of call for residents when they needed to raise issues or concerns and it was just as easy for Members to raise these themselves. Councillor Collins referred to two complaints that had taken over a month for a response to which Lee Henley stated there were clear complaint deadlines in place and responses should not take a month. Lee Henley asked for Councillor Collins to send these two complaints to him to review. Lee Henley agreed that Members would always be there as an escalation point to assist residents, if they were unhappy with responses to issues raised via our on-line reporting facilities, and these would be logged as either a complaint or a member enquiry.

Councillor Collins questioned whether with staff working from home had an impact on the efficiency of some of the systems that were in place before COVID and whether a performance review had been undertaken. Councillor Collins also questioned when it was likely that staff would be back to working in the offices again. Sean Clark stated the Council was waiting on the lockdown rollout to go through and advice from that would come from Public Health England and the Council's Director of Public Health. That before COVID the Council had already started several years ago to look at reducing the size of office space and looking for staff to work from home more often. That this had also been the direction of travel and once COVID had passed it would not return to how it had been but had accelerated that direction of travel.

Lisa Laybourn referred to the compensation section of the report and that all compensations paid out were at ombudsman level and questioned whether there had been a cost to the ombudsman reviewing the cases and whether any financial remedy would be offered before it got to that stage. Lee Henley stated that compensation is offered to residents as part of our complaints process and prior to cases going to the Ombudsman, but not within this six month period.

#### **RESOLVED**

- 1. That Members noted the statistics and performance for the reporting period.
- 2. That Members would encourage residents to report (where possible) their concerns by using our online reporting facilities.

#### 80. Counter Fraud & Investigation Quarterly Update (Q3)

David Kleinberg presented the report that outlined the performance of Counter Fraud and Investigation over the last year to Quarter Three (Q3) for Thurrock Council, as well as the work the team had delivered nationally for other public bodies.

Councillor Potter referred to Performance and asked for an example on what Money Laundering was under the fraud type heading. David Kleinberg stated that this was a Council activity where a person had benefitted from a crime and it was the Council's statutory duty to investigate. Such as within the Enforcement Team there was a planning enforcement, somebody could expand a commercial business without permission, then earn money from that unlawful activity, then use the money laundering part for their own financial gain.

Councillor Collins referred to the footnote on page 124 of the agenda in regards to how COVID had severely affected the judicial system and questioned how much money had been tied up waiting for the litigation to go through. David Kleinberg stated this was a large amount about 70% of the £2.2 million was tied up in outcomes. That Thurrock Council was not the only authority who had been affected by this and that work was being undertaken to open up additional court sessions to address the backlog. Unfortunately at this time we were in the queue and once casework had been heard we could hopefully achieve the outcomes.

#### **RESOLVED**

That Standards and Audit Committee commented on the performance of the Counter Fraud & Investigation Department.

# 81. Annual Review of Risk and Opportunity Management and the Policy, Strategy and Framework

Andy Owen presented the report that provided independent assurance that the Authority's risk management arrangements were adequate and effective. The Council's ROM arrangements in the report was presented on an annual basis. The report provided details of how the Council's ROM arrangements compared against good practice, outlined the current ROM activity, the proposals to maintain/improve the practice across the organisation and included the updated ROM Policy, Strategy and Framework.

Councillor Potter stated he was impressed with the scores compared on the Analysis and Evaluation of Results that had shown Thurrock's scores had improved and this was good news.

Councillor C Kent referred to the same scores and questioned what was being put in place to improve those scores that had stayed the same and to progress up to the next stage. Andy Owen stated this had been looked into and had remained a bit static over the last couple of years which may be down to the capacity of the corporate centre but there were elements of the framework and the system processes to improve a little in some of the scores. But to get to the higher level would take quite a bit of action. Councillor C Kent questioned whether anything was in place to compare ourselves with other authorities in assessing ourselves on this system to see if improvements could be made. Andy Owen stated this could be looked into and addressed in the coming year but with the capacity and resource that was available the Council was doing very well at level 4.

#### RESOLVED

- 1. That Standards and Audit Committee noted the results of the review, the current ROM activity and proposals to maintain and improve the practice across the organisation.
- 2. That Standards and Audit Committee noted and approved the updated ROM Policy, Strategy and Framework.

# 82. In Quarter 4 Review of the Strategic/Corporate Risk and Opportunity Register

Andy Owen presented the report that provided independent assurance that the authority's risk management arrangements were adequate and effective. The report was presented on a bi annual basis and provided details of how the key risks and opportunities facing the authority were identified and managed. This report provided the key risks and opportunities identified by the review and the revised Strategic/Corporate Risk and Opportunity Register. That a number of the risks and opportunities or management response arrangements had been impacted by the pandemic situation and the effects on the items had been reflected in the report. The register was due to be refreshed in the next review and this would enable the impacts from the pandemic situation to be fully considered and appropriate changes incorporated in the records.

Councillor Potter agreed that it was a valid point that the register be refreshed in the next review as this would allow some flexibility and allow projections in regards to accounting to be undertaken.

Councillor Collins referred to Appendix 2 – Risks and Opportunities in Focus Report – Adult Social Care Stability and Market Failure – Risk 2, and questioned whether there was any risk of care homes in Thurrock closing and the risk of Thurrock having to take care home residents from other boroughs. Sean Clark stated he was unable to answer whether Thurrock would have to take any additional residents from care homes outside of the borough. That before COVID, it was known that care homes were a very fragile market and Thurrock's rates had been low, with Thurrock being one of the lowest spending authorities in the country, in terms of adult social care. The additional expenditure spent on adult social care during the COVID period had been around resilience such as with the increase in fees and to support businesses with extra PPE as required, to protect the Council. Sean Clark stated he was unaware of anything but was aware that the payments made had supported that resilience.

#### **RESOLVED**

1. That Standards and Audit Committee noted the items and details contained in the Dashboard.

2. That Standards and Audit Committee noted the 'In Focus' report which highlighted the higher priority items identified by the review.

#### 83. Internal Audit Progress Report 2020/21

Gary Clifford presented the progress report that covered final reports issued since the last progress report to the Standards and Audit Committee on 24 November 2020, draft reports issued and work in progress.

Councillor Potter referred to Appendix 1, Reports issued as Final, in Draft and Work in Progress and asked for clarification on those assignments marked as advisory. Gary Clifford stated that advisory reports were service driven rather than risk and audit driven.

#### **RESOLVED**

That Standards and Audit Committee considered the reports issued and the work being carried out by Internal Audit in relation to the 2020/21 audit plan.

# 84. Internal Audit Strategy 2020/21 to 2022/23 and Annual Internal Audit Plan 2021/22

Gary Clifford presented the report that between December 2019 and March 2020, a comprehensive Audit Needs Assessment process had been undertaken which involved attending meetings with each of the Directorate Management Teams to discuss the risks and priorities with Directors, Assistant Directors and other senior management. As a result, a three year Strategy for Internal Audit 2020/21 to 2022/23 was developed. During the latter part of this process, the implications from COVID had started to emerge with changes to working practices, and in some cases, changes to job roles. Due to the continually emerging issues, this was not reflected in the plan but as a result, the scope of some reviews changed during the year to ensure the Internal Audit Service was utilising its resources to best meet the needs of the Council. It had been agreed with the Corporate Director of Finance, Governance & Property that the pandemic was likely to have a continuing impact during 2021/22 so a three to six month rolling plan would be beneficial to allow the service to react pro-actively to changing risks and priorities.

Councillor Potter referred to Appendix B – Internal Audit Strategy 2021/21-2022/23 and asked for clarification on the unaccompanied asylum seeker payments when their applications had been rejected. Gary Clifford stated there was an application process for unaccompanied asylum seekers and those applications that were rejected would not be entitled to assistance from the Council this would have to come from other resources.

#### **RESOLVED**

# That Standards and Audit Committee received and agreed the Internal Audit Plan 2021/22.

#### 85. Investment Briefing

Sean Clark presented the report and stated the Standards and Audit Committee had received a number of updates on the Council's investments and borrowings with the most recent being at their meeting on 24 November 2020. As requested by the committee this report provided the latest update to Members.

Councillor Potter stated he was pleased with the net position of the overall surplus investments in 2019/20 and stated he was not surprised that COVID had made an impact.

Councillor Collins thanked Officers for delivering strong income investments and his appreciation that Officers had the foresight not to invest in shopping centres or airports.

#### **RESOLVED**

That Standards and Audit Committee noted the report.

#### 86. A13 Widening Project

Sean Clark presented the report that provided Members with an update on the A13 project. The report focused on the latest progress made on the delivery of the scheme, the current programme and current out turn forecast. This noted the impact of COVID-19 on the programme.

Councillor Potter stated the health of persons working on this scheme should come first and that Members and residents should approve the delays that had been caused by the COVID pandemic.

Councillor C Kent questioned how the funding gap would be financed to which Sean Clark stated ongoing discussions were taking place with third parties, such as Highways England, Department of Transport and SELEP, to identify contributions and discussions were being undertaken with legal advisors. Members were reassured that when responses had been received this would be reported to committee.

#### **RESOLVED**

That Standards and Audit Committee noted and commented on the report content.

#### 87. Stanford Le Hope Transport Projects

Sean Clark presented the report that provided Members with an update on the Stanford Le Hope Transport Project. This report and future reports would

focus on the latest progress in delivery of the scheme, any changes in the agreed programme and any changes in the outturn forecast.

With no questions from Members, Councillor Potter moved to the recommendation.

#### **RESOLVED**

That Standards and Audit Committee noted and commented on the report content.

#### 88. Work Programme

Members discussed the items for the 2021/22 municipal calendar.

Councillor Potter thanked all Officers for all their hard work and their commitment to the residents of Thurrock.

The meeting finished at 8.33 pm

Approved as a true and correct record

CHAIR

**DATE** 

Any queries regarding these Minutes, please contact Democratic Services at <a href="mailto:Direct.Democracy@thurrock.gov.uk">Direct.Democracy@thurrock.gov.uk</a>

8 July 2021		ITEM: 5	
Standards and Audit Committee			
Regulation of Investigatory Powers Act (RIPA) - Activity Report 2020/21			
/ards and communities affected: Key Decision:			
N/A	N/A		
Report of: Lee Henley – Strategic Lead – Information Management			
Accountable Strategic Lead: Lee Henley – Strategic Lead – Information Management			
Accountable Director: Sean Clark – Corporate Director Resources and Place Delivery			
This report is public			

#### **Executive Summary**

#### This report:

- Provides an update on the usage and activity of RIPA requests during 2020/21.
- Provides an update following on from an inspection that took place by the Investigatory Powers Commissioner's Office.
- Provides a refreshed RIPA Policy for approval.
- 1. Recommendation(s)
- 1.1 To note the statistical information relating to the use of RIPA for the period 2020/21.
- 1.2 To note the findings of the RIPA inspection.
- 1.3 To agree a revised RIPA Policy.
- 2. Introduction and Background
- 2.1 The Regulation of Investigatory Powers Act 2000 (RIPA), and the Protection of Freedoms Act 2012, legislates for the use of local authorities of covert methods of surveillance and information gathering to assist in the detection and prevention of crime in relation to an authority's core functions.
- 2.2 On the 1st September 2017, The Office of Surveillance Commissioners, The Intelligence Services Commissioner's Office and The Interception of

Communications Commissioner's Office were abolished by the Investigatory Powers Act 2016. The Investigatory Powers Commissioner's Office (IPCO) is now responsible for the judicial oversight of the use of covert surveillance by public authorities throughout the United Kingdom.

- 2.3 The RIPA Single Point of Contact (SPOC) maintains a RIPA register of all directed surveillance RIPA requests and approvals across the council.
- 3. Issues, Options and Analysis of Options
- 3.1 RIPA Activity
- 3.1.1 There was 1 Thurrock RIPA surveillance authorisation processed during 2020/21. Below is a breakdown showing the areas the authorisations relate to for this period (along with previous year's figures):

	2019/20	2020/21
Trading Standards	1	0
Fraud	1	1
Covert Human Intelligence	0	0
Source (CHIS) authorisations		
Total	2	1

- 3.1.2 The outcomes of the above RIPA directed surveillance authorisations cannot be summarised in detail. This is due to Data Protection requirements and to ensure that any on-going investigations are not compromised as a result of a disclosure of information.
- 3.1.3 The table below shows the number of requests made to the National Anti-Fraud Network (NAFN) for Communication Data requests:

Application Type:	2019/20	2020/21
Events (Service) Data	1 (Fraud)	1 (Fraud)
Entity (Subscriber) Data	5 (Fraud)	9 (Fraud)
Combined	3 (Trading Standards	12 (11 Fraud and 1 Trading Standards)
Totals	9	22

#### Notes in relation to NAFN applications:

- Events Data Is information held by a telecom provider including itemised telephone bills and/or outgoing call data.
- Entity Data Includes any other information or account details that a telecom provider holds e.g. billing information.
- Combined Includes applications that contain both Events and Entity data.

#### 3.2 Inspection by the Investigatory Powers Commissioner's Office

- 3.2.1 An on-site inspection by the Investigatory Powers Commissioner's Office (IPCO) was originally planned for 2020. However due to Covid restrictions, the IPCO Inspector agreed to:
  - Postpone the on-site inspection.
  - Undertake a telephone-based inspection. This was carried out in February 2021 and followed on from detailed documentation that was provided to the Inspector by the RIPA Single Point of Contact back in April 2020.
  - Receive from the council, a sample of surveillance authorisations approved since the previous inspection back in 2016, once the Covid restrictions are lifted. These were subsequently sent to the Inspector on 4 May 2021 by the RIPA Single Point of Contact.
- 3.2.2 The findings of the telephone inspection are summarised below:
  - That the previous recommendations, made by the Assistant Surveillance Commissioner as part of the inspection in November 2016, have been fully discharged by the council.
  - The Inspector recommended a revision to the policy covering the acquisition of communications data to reflect legislative changes arising from the implementation of the Investigatory Powers Act 2016 - These changes were incorporated in the policy that went to Committee on 9 July 2020.
  - The inspector commented that its pleasing to note that RIPA training continues to be delivered annually to authorising officers and the Trading Standards and Corporate Fraud Teams, who are the most likely officers to undertake operations using covert investigatory powers.
  - It was unclear whether all online activity conducted in connection with children's services, enforcement or investigative functions, is recorded and periodically scrutinised for oversight purposes.
  - The policy requires additional information in relation to the retention of data to ensure records are retained for as long as necessary.
  - The policy should be clear that the Authorising Officer is responsible for directed surveillance authorisations and not the Senior Responsible Officer (SRO).
- 3.2.3 The key findings of the surveillance authorisation inspection are summarised below:
  - The Inspector concluded that the council takes it RIPA responsibilities seriously and conducts investigations in an ethical and compliant manner.
  - Authorising officers need to articulate clearly why they believe that the activities authorised are proportionate.
  - When cancelling an authorisation, the Authorising Officers should record the value of the surveillance and the reasons for cancellation.

#### 3.3 **Policy Changes:**

- 3.3.1 The RIPA Policy has been amended following on from the inspection referred to within 3.2 above. A summary of key changes made are shown below:
  - Sections 4 and 5 The policy is now clear that the Authorising Officer is responsible and/or accountable for the authorisation of applications and not the Senior Responsible Officer (SRO). The SRO role is a quality assurance role (e.g. to ensure the request meets the crime threshold).
  - Section 10 The policy now includes specific information regarding the management and retention of directed surveillance records. This includes setting out the arrangements to ensure that directed surveillance records are held for as long as necessary.
  - Section 15 The policy is clear that records of visits by staff to any social media sites must be documented by staff at all times. A Social Media Activity Log has been set up for service areas to records such checks. The policy also sets out the arrangements in place to check for compliance regarding social media monitoring.

#### 4. Reasons for Recommendation

- 4.1 This report provides an update on the usage and activity of RIPA requests for 2020/21, provides an up to date RIPA Policy for approval and summarises the outcome from an inspection.
- 5. Consultation (including Overview and Scrutiny, if applicable)
- 5.1 The RIPA SPOC has consulted with the relevant departments to obtain the data set out in this report.
- 6. Impact on corporate policies, priorities, performance and community impact
- 6.1 Monitoring compliance with RIPA supports the council's approach to corporate governance and will ensure the proper balance of maintaining order against protecting the rights of constituents within Thurrock.

#### 7. Implications

#### 7.1 Financial

Implications verified by: Jonathan Wilson

**Assistant Director of Finance** 

The reported RIPA Activity is funded from within agreed budget envelopes.

#### 7.2 **Legal**

Implications verified by: **Tim Hallam** 

Strategic Lead – Legal

There are no legal implications directly related to this report. It is noted that following an IPCO inspection earlier this year a number of policy changes have been introduced as outlined in 3.3 of the report. This is in accordance with the recommendations of the IPCO and their role in the judicial oversight of the use of Covert surveillance by Public authorities.

#### 7.3 **Diversity and Equality**

Implications verified by: Natalie Smith

**Community Development and Equalities** 

Manager

There are no such implications directly related to this report.

- **8. Background papers used in preparing the report** (including their location on the council's website or identification whether any are exempt or protected by copyright):
  - None.

#### 9. Appendices to the report

Appendix A – RIPA Policy

#### **Report Author**

Lee Henley

Strategic Lead - Information Management



# Regulation of Investigatory Powers Act 2000 (RIPA) Policy

## **Version Control Sheet:**

Title:	RIPA Policy.
Purpose:	To advise staff of the procedures and principles to follow to comply with the RIPA Act.
Author:	Lee Henley – Strategic Lead Information Management
Owner:	Ian Hunt – Assistant Director of Law and Governance & Monitoring Officer
Approved by:	Standards and Audit Committee.
Date:	July 2021
Version Number:	4.0
Status:	Final.
Review Frequency:	As and when changes to legislation take place
Next review date:	As and when changes to legislation take place

## **Amendment History / Change Record:**

Date	Version	Key Changes / Sections Amended	Amended By
July 2021	4.0	<ul> <li>Section 4 (points 5 and 9) - The policy is now clear that the Authorising Officer is responsible and/or accountable for the authorisation of applications and not the Senior Responsible Officer (SRO). The SRO role is a quality assurance role (e.g. to ensure the request meets the crime threshold)</li> <li>Section 5 - The policy is now clear that the Authorising Officer is responsible and/or accountable for the authorisation of applications and not the Senior Responsible Officer (SRO).</li> <li>Section 10 – The policy now includes specific information regarding the management and retention of directed surveillance records. This includes setting out the arrangements to ensure</li> </ul>	Strategic Lead  – Information Management

- that directed surveillance records are held for as long as necessary
- Section 15 The policy is clear that records of visits by staff to any social media sites must be documented by staff at all times. A Social Media Activity Log has been set up for service areas to records such checks. The policy also sets out the arrangements in place to check for compliance regarding social media site monitoring

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#### 1. A brief overview of RIPA

(For text in **bold**, see glossary of terms – Appendix 1)

The Regulation of Investigatory Powers Act (RIPA) was introduced by Parliament in 2000. The Act sets out the reasons for which the use of **directed surveillance** (DS) and **covert human intelligence source** (CHIS) may be authorised.

Local Authorities' abilities to use these investigation methods are restricted in nature and may only be used for the prevention and detection of crime or the prevention of disorder. Local Authorities are not able to use **intrusive surveillance**.

Widespread, and often misinformed, reporting led to public criticism of the use of surveillance by some Local Authority enforcement officers and investigators. Concerns were also raised about the trivial nature of some of the 'crimes' being investigated. This led to a review of the legislation and ultimately the introduction of the Protection of Freedoms Act 2012 and the RIPA Directed Surveillance and Covert Human Intelligence Source (CHIS) (Amendment) Order 2012.

In addition to defining the circumstances when these investigation methods may be used, the Act also directs how applications will be made and how, and by whom, they may be approved, reviewed, renewed, cancelled and retained.

The Act must be considered in tandem with associated legislation including the Human Rights Act (HRA), and the Data Protection Act (DPA).

Further, a Local Authority may only engage the Act when performing its 'core functions'. For example, a Local Authority may rely on the Act when conducting a criminal investigation as this would be considered a 'core function', whereas the disciplining of an employee would be considered a 'non-core' or 'ordinary' function.

Examples of when local authorities may use RIPA and CHIS are as follows:

- Trading standards action against loan sharks, rogue traders, consumer scams, deceptive advertising, counterfeit goods, unsafe toys and electrical goods;
- Enforcement of anti-social behavior orders and legislation relating to unlawful child labour;
- Housing/planning interventions to stop and make remedial action against unregulated and unsafe buildings, breaches of preservation orders, cases of landlord harassment;
- Counter Fraud investigating allegations of fraud, bribery, corruption and theft committed against the Council; and
- Environment protection action to stop large-scale waste dumping, the sale of unfit food and illegal 'raves'.

The examples do not replace the key principles of necessity and proportionality or the advice and guidance available from the relevant oversight Commissioners.

There are 3 key codes of practice and guidance available in relation to the RIPA Act and these are shown in the links below:

#### **Covert Surveillance and Property Interference - Code of Practice**

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/742041/201800802 CSPI code.pdf

#### **Covert Human Intelligence Sources - Code of Practice**

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/742042/20180802\_CHIS\_code\_.pdf

#### **Communications Data - Code of Practice**

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/757850/Communications\_Data\_Code\_of\_Practice.pdf

#### 2. Directed Surveillance

This policy relates to all staff directly employed by Thurrock Council when conducting relevant investigations for the purposes of preventing and detecting crime or preventing disorder, and to all contractors and external agencies that may be used for this purpose as well as to those members of staff tasked with the authorisation and monitoring of the use of directed surveillance, CHIS and the acquisition of communications data.

It is essential that the Chief Executive and Directors should have an awareness of the basic requirements of RIPA and also an understanding of how it might apply to the work of individual council departments. Without this knowledge at senior level, it is unlikely that any authority will be able to develop satisfactory systems to deal with the legislation. Those who need to use or conduct directed surveillance or CHIS on a regular basis will require more detailed specialised training.

The use of directed surveillance or a CHIS must be necessary and proportionate to the alleged crime or disorder. Usually, it will be considered to be a tool of last resort, to be used only when all other less intrusive means have been used or considered.

#### **Necessary**

A person granting an authorisation for directed surveillance must consider *why* it is necessary to use covert surveillance in the investigation *and* believe that the activities to be authorised are necessary on one or more statutory grounds.

If the activities are deemed necessary, the authoriser must also believe that they are proportionate to what is being sought to be achieved by carrying them out. This involves balancing the seriousness of the intrusion into the privacy of the subject of the operation (or any other person who may be affected) against the need for the activity in investigative and operational terms.

#### **Proportionate**

The authorisation will not be proportionate if it is excessive in the overall circumstances of the case. Each action authorised should bring an expected benefit to the investigation or operation and should not be disproportionate or arbitrary. The fact that a suspected offence may be serious will not alone render intrusive actions proportionate. Similarly, an offence may be so minor that any deployment of covert techniques would be disproportionate. No activity should be considered proportionate if the information which is sought could reasonably be obtained by other less intrusive means.

The following elements of proportionality should therefore be considered:

- balancing the size and scope of the proposed activity against the gravity and extent of the perceived crime or offence;
- 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 necessary result;
- evidencing, as far as reasonably practicable, what other methods had been considered and why they were not implemented.

The Council will conduct its directed surveillance operations in strict compliance with the Data Protection Act (DPA) principles and limit them to the exceptions permitted by the Human Rights Act and RIPA, and solely for the purposes of preventing and detecting crime or preventing disorder.

The **Senior Responsible Officer** (SRO) as named in Appendix 2 will be able to give advice and guidance on this legislation. The SRO will appoint a RIPA Single Point of Contact/Coordinating Officer (SPOC) (as named in Appendix 2). The SPOC will be responsible for the maintenance of a **central register** that will be available for inspection by the Investigatory Powers Commissioner's Office (IPCO).

The use of hand-held cameras and binoculars can greatly assist a directed surveillance operation in public places. However, if they afford the investigator a view into private premises that would not be possible with the naked eye, the surveillance becomes intrusive and is not permitted. Best practice for compliance with evidential rules relating to photographs and

video/CCTV footage is contained in Appendix 4. Directed surveillance may be conducted from private premises. If they are used, the applicant must obtain the owner's permission, in writing, before authorisation is given. If a prosecution then ensues, the applicant's line manager must visit the owner to discuss the implications and obtain written authority for the evidence to be used.

The general usage of the council's CCTV system is not affected by this policy. However, if cameras are specifically targeted for the purpose of directed surveillance, a RIPA authorisation must be obtained.

Wherever knowledge of **confidential information** is likely to be acquired or if a vulnerable person or juvenile is to be used as a CHIS, the authorisation must be made by the Chief Executive (or in their absence whoever deputises for this role).

Directed surveillance that is carried out in relation to a **legal consultation** on certain premises will be treated as intrusive surveillance, regardless of whether legal privilege applies or not. These premises include prisons, police stations, courts, tribunals and the premises of a professional legal advisor. Local Authorities are not able to use intrusive surveillance. Operations will only be authorised when there is sufficient, documented, evidence that the alleged crime or disorder exists and when directed surveillance is considered to be a necessary and proportionate step to take in order to secure further evidence.

Low level surveillance, such as 'drive-bys' or everyday activity observed by officers in the course of their normal duties in public places, does not need RIPA authority. If surveillance activity is conducted in immediate response to an unforeseen activity, RIPA authorisation is not required. However, if repeated visits are made for a specific purpose, authorisation may be required. In cases of doubt, legal advice should be taken.

When vehicles are being used for directed surveillance purposes, drivers must at all times comply with relevant traffic legislation.

#### **Crime Threshold**

An additional barrier to authorising directed surveillance is set out in the Regulation of Investigatory Powers (Directed Surveillance and CHIS) (Amendment) Order 2012. This provides a 'Crime Threshold' whereby only crimes which are either punishable by a maximum term of at least 6 months' imprisonment (whether on summary conviction or indictment) or are related to the underage sale of alcohol or tobacco can be investigated through Directed Surveillance.

A crime threshold applies to the authorisation of directed surveillance by local authorities under RIPA and the acquisition of Communications Data (CD). It does not apply to the authorisation of local authority use of CHIS.

Thurrock cannot authorise directed surveillance for the purpose of preventing disorder unless this involves a criminal offence(s) punishable (whether on summary conviction or indictment) by a maximum term of at least 6 months' imprisonment.

Thurrock may therefore continue to authorise use of directed surveillance in more serious cases as long as the other tests are met – i.e. that it is necessary and proportionate and where prior approval from a Magistrate has been granted. Examples of cases where the offence being investigated attracts a maximum custodial sentence of six months or more could include more serious criminal damage, dangerous waste dumping and serious or serial fraud.

Thurrock may also continue to authorise the use of directed surveillance for the purpose of preventing or detecting specified criminal offences relating to the underage sale of alcohol and tobacco where the necessity and proportionality test is met and prior approval from a Justice of the Peace (JP) has been granted.

A local authority such as Thurrock may not authorise the use of directed surveillance under RIPA to investigate disorder that does not involve criminal offences.

An Authorising Officer's Aide-Memoire has been produced (Appendix 6) to assist Authorising Officers when considering applications for directed surveillance

#### 3. Covert Human Intelligence Sources (CHIS)

A person who reports suspicion of an offence is not a CHIS, nor do they become a CHIS if they are asked if they can provide additional information, e.g. details of the suspect's vehicle or the time that they leave for work. It is only if they establish or maintain a personal relationship with another person for the purpose of covertly obtaining or disclosing information that they become a CHIS.

If it is deemed unnecessary to obtain RIPA authorisation in relation to the proposed use of a CHIS for test purchasing, the applicant should complete the council's CHIS form and submit to an Authorising Officer for authorisation. Once authorised, any such forms must be kept on the relevant investigation file, in compliance with the Criminal Procedure for Investigations Act 1996 ("CPIA").

The times when a local authority will use a CHIS are limited. The most common usage is for test-purchasing under the supervision of suitably trained officers.

Officers considering the use of a CHIS under the age of 18, and those authorising such activity must be aware of the additional safeguards identified in The Regulation of Investigatory Powers (Juveniles) Order 2000 and its Code of Practice. The most recent order which is SI 2018/715 (http://www.legislation.gov.uk/uksi/2018/715/made)

A vulnerable individual should only be authorised to act as a CHIS in the most exceptional circumstances. A vulnerable individual is a person who is or may be in need of community care services by reason of mental or other disability, age or illness, and who is or may not be able to take care of himself. The Authorising Officer in such cases must be the Chief Executive, who is the Head of Paid Service, or in their absence whoever deputises for this role.

Any deployment of a CHIS should take into account the safety and welfare of that CHIS. Before authorising the use or conduct of a CHIS, the authorising officer should ensure that an appropriate bespoke risk assessment is carried out to determine the risk to the CHIS of any assignment and the likely consequences should the role of the CHIS become known. This risk assessment must be specific to the case in question. The ongoing security and welfare of the CHIS, after the cancellation of the authorisation, should also be considered at the outset.

A CHIS handler is responsible for bringing to the attention of a CHIS controller any concerns about the personal circumstances of the CHIS, insofar as they might affect the validity of the risk assessment, the conduct of the CHIS, and the safety and welfare of the CHIS.

The process for applications and authorisations have similarities to those for directed surveillance but there are also significant differences, namely that the following arrangements must be in place at all times in relation to the use of a CHIS:

- There will be an appropriate officer of the Council who has day-to-day responsibility for dealing with the CHIS, and for the security and welfare of the CHIS; and
- There will be a second appropriate officer of the use made of the CHIS, and who will
  have responsibility for maintaining a record of this use. These records must also
  include information prescribed by the Regulation of Investigatory Powers (Source
  Records) Regulations 2000. Any records that disclose the identity of the CHIS must not
  be available to anyone who does not have a need to access these records.

#### 4. The Authorisation Process

The processes for applications and authorisations for CHIS are similar as for directed surveillance, but note the differences set out in the CHIS section above. Directed Surveillance applications and CHIS applications are made using forms that have been set up in a shared network drive by the council. These forms must not be amended and applications will not be accepted if the approved forms are not completed.

The authorisation process involves the following steps and is also summarised (in flowchart form) within Appendix 7:

#### **Investigation Officer**

- 1. A risk assessment will be conducted by the Investigation Officer before an application is drafted. This assessment will include the number of officers required for the operation; whether the area involved is suitable for directed surveillance; what equipment might be necessary, health and safety concerns of all those involved and affected by the operation and insurance issues. Particular care must be taken when considering surveillance activity close to schools or in other sensitive areas. If it is necessary to conduct surveillance around school premises, the applicant should inform the head teacher of the nature and duration of the proposed activity, in advance. A Police National Computer (PNC) check on those targets should be conducted as part of this assessment by the Counter Fraud & Investigation team.
- 2. The Investigation Officer prepares an application. When completing the forms, Investigation Officers must fully set out details of the covert activity for which authorisation is sought to enable the Authorising Officer to make an informed judgment. Consideration should be given to consultation with a lawyer concerning the activity to be undertaken (including scripting and tasking).
- 3. The Investigation Officer will submit the application form to an authorising officer for approval.
- 4. All applications to conduct directed surveillance (other than under urgency provisions see below) must be made in writing in the approved format.

#### **Authorising Officer (AO)**

- 5. The AO considers the application and if it is considered complete the application is signed off and forwarded to the Senior Responsible Officer (SRO). It should be noted that the AO is responsible and/or accountable for the authorisation of applications and not the SRO. The SRO role is a quality assurance role (e.g. to ensure the request meets the crime threshold)
- 6. An Authorising Officer's Aide-Memoire has been produced to assist AO's when considering applications for directed surveillance. This must be completed by the AO.
- 7. If there are any deficiencies in the application further information may be sought from the Investigation Officer, prior to sign off.
- 8. Once reviewed by the SRO (see below), the AO and the Investigation Officer will retain copies and will create an appropriate diary method to ensure that any additional documents are submitted in good time.

#### Senior Responsible Officer (SRO)

- 9. The SRO then reviews the AO's approval and countersigns it. As referred to above, the AO is responsible and/or accountable for the authorisation of applications and not the SRO. The SRO role is a quality assurance role (e.g. to ensure the request meets the crime threshold)
- 10. If the application requires amendment the SRO will return this to the AO for the necessary revisions to be made prior to sign off. Once the SRO is satisfied that concludes the internal authorisation procedure and he or she will countersign the application (see section 5 below). This will allow the Investigation Officer to link in with the RIPA Single Point of Contact, in order to obtain a unique reference number (URN) from the central register (prior to any court authorisation).

#### Application to JPs Court

11. The countersigned application form will form the basis of the application to the JPs Court (see further below).

#### **Authorised Activity**

- 12. Authorisation takes effect from the date and time of the approval from the JPs Court.
- 13. Where possible, private vehicles used for directed surveillance purposes should have keeper details blocked by the Counter Fraud & Investigation team.
- 14. Notification of the operation will be made to the relevant police force intelligence units where the target of the operation is located in their force area. Contact details for each force intelligence unit are held by the Group Manager Counter Fraud & Investigation Counter Fraud & Investigation team.
- 15. Before directed surveillance activity commences, the Investigation Officer will brief all those taking part in the operation. The briefing will include details of the roles to be played by each officer, a summary of the alleged offence(s), the name and/or description of the subject of the directed surveillance (if known), a communications check, a plan for discontinuing the operation and an emergency rendezvous point. A copy of the briefing report (Appendix 3) will be retained by the Investigation Officer.
- 16. Where 3 or more officers are involved in an operation, officers conducting directed surveillance will complete a daily log of activity an example shown at Appendix 5. Evidential notes will also be made in the pocket notebook of all officers engaged in the operation regardless of the number of officers on an operation. These documents will be kept in accordance with the appropriate retention guidelines.
- 17. Where a contractor or external agency is employed to undertake any investigation on behalf of the Council, the Investigation Officer will ensure that any third party is adequately informed of the extent of the authorisation and how they should exercise their duties under that authorisation.

#### **Conclusion of Activities**

- 18. As soon as the authorised activity has concluded the Investigation Officer will complete a Cancellation Form.
- 19. The original copy of the complete application will be retained with the central register.

#### 5. Senior Responsible Officer (SRO) Review and Sign Off

The SRO will review the AO approval prior to it being submitted for Magistrates/JP authorisation. This is from a quality assurance aspect only, as the AO has overall responsibility and accountability for signing off applications (and not the SRO).

Once the SRO has countersigned the form this will form the basis of the application to the Magistrates Court for authorisation.

#### 6. <u>Judicial Authorisation</u>

The Authorising Officer or Investigating Officer will provide the court with a copy of the original RIPA authorisation or notice and the supporting documents setting out the case. This forms the basis of the application to the court and should contain all information that is relied upon. The necessity and proportionality of acquiring consequential acquisition will be assessed by the JP as part of their consideration.

The original RIPA authorisation or notice should be shown to the court but also be retained by Thurrock Council so that it is available for inspection by the Commissioners' officers and in the event of any legal challenge or investigations by the Investigatory Powers Tribunal (IPT). The Court may also wish to keep a copy so an extra copy should be made available to the Court.

Importantly, the Authorising Officer or Investigating Officer will also need to provide the court with a partially completed judicial application/order form. The order section of the form will be completed by the JP and will be the official record of the JP's decision.

The officer from Thurrock will need to obtain judicial approval for all initial RIPA authorisations/applications and renewals and will need to retain a copy of the judicial application/order form after it has been signed by the JP. There is no requirement for the JP to consider either cancellations or internal reviews.

The authorisation will take effect from the date and time of the JP granting approval and Thurrock may proceed to use the techniques approved in that case.

On the rare occasions where due to out of hours and no access to a Court and Justice of the Peace (JP), then it will be for the officer to make local arrangements with the relevant Her Majesty's Courts and Tribunals Service. In these cases the council will need to provide two partially completed judicial application/order forms so that one can be retained by the JP. They should provide the court with a copy of the signed judicial application/order form the next working day.

In most emergency situations where the police have power to act, then they are able to authorise activity under RIPA without prior JP approval. No RIPA authority is required in immediate response to events or situations where it is not reasonably practicable to obtain it (for instance when criminal activity is observed during routine duties and officers conceal themselves to observe what is happening).

Where renewals are timetabled to fall outside of court hours, for example during a holiday period, it is the local authority's responsibility to ensure that the renewal is completed ahead of the deadline.

It is not Thurrock's policy that legally trained personnel are required to make the case to the JP. The forms and supporting papers must by themselves make the case.

#### 7. Authorisation periods

The authorisation will take effect from the date and time of the JP granting approval and Thurrock may proceed to use the techniques approved in that case.

A written authorisation (unless renewed or cancelled) will cease to have effect after 3 months. The Authorising Officer should set a review date at the outset which should be "as frequently as is considered necessary and practicable" (the "norm" is one month after authorisation).

Renewals should not normally be granted more than seven days before the original expiry date. If the circumstances described in the application alter, the applicant must submit a review document before activity continues.

As soon as the operation has obtained the information needed to prove, or disprove, the allegation, the applicant must submit a cancellation document and the authorised activity must cease.

CHIS authorisations will (unless renewed or cancelled) cease to have effect 12 months from the day on which authorisation took effect, except in the case of juvenile CHIS which will cease to have effect after 4 months. Urgent oral authorisations or authorisations will unless renewed, cease to have effect after 72 hours.

#### 8. Urgency

The law has been changed so that urgent cases can no longer be authorised orally. Approval for directed surveillance in an emergency must now be obtained in written form. Oral approvals are no longer permitted. In cases where emergency approval is required an AO must be visited by the applicant with two completed RIPA application forms. The AO will then assess the proportionality, necessity and legality of the application. If the application is approved then the applicant must then contact the out-of-hours HMCTS representative to seek approval from a Magistrate. The applicant must then take two signed RIPA application forms and the judicial approval form to the Magistrate for the hearing to take place.

As with a standard application the test of necessity, proportionality and the crime threshold must be satisfied. A case is not normally to be regarded as urgent unless the delay would, in the judgment of the person giving the authorisation, be likely to endanger life or jeopardise the investigation or operation. Examples of situations where emergency authorisation may be sought would be where there is intelligence to suggest that there is a substantial risk that evidence may be lost, a person suspected of a crime is likely to abscond, further offences are likely to take place and/or assets are being dissipated in a criminal investigation and money laundering offences may be occurring. An authorisation is not considered urgent if the need for authorisation has been neglected or the urgency is due to the authorising officer or applicant's own doing.

## 9. Communications Data (CD) and the use of the National Anti- Fraud Network (NAFN)

Communications Data ('CD') is the 'who', 'when' and 'where' of a communication, but not the 'what' (i.e. the content of what was said or written). Local Authorities are not permitted to intercept the content of any person's communications.

Authorising Officers (AO) must not authorise requests for their own service area and will access the restricted area of the National Anti-Fraud Network (NAFN) website using a special code, in order to review and approve the application. When approving the application, the AO must be satisfied that the acquiring of the information is necessary, proportionate and meets the serious crime threshold.

Part 3 of the Investigatory Powers Act 2016 (IPA) replaced part 1 chapter 2 of RIPA in relation to the acquisition of communications data (CD) and puts local authorities on the same standing as the police and law enforcement agencies. Previously local authorities have been limited to obtaining subscriber details (known now as "entity" data) such as the registered user of a telephone number or email address. Under the IPA, local authorities can now also obtain details of in and out call data, and cell site location. This information identifies who a criminal suspect is in communication with and whereabouts the suspect was when they made or received a call, or the location from which they were using an Internet service. This additional data is defined as "events" data.

A new threshold for which CD "events" data can be sought has been introduced under the IPA as "applicable crime". Defined in section 86(2A) of the Act this means: an offence for which an adult is capable of being sentenced to one year or more in prison; any offence involving violence, resulting in 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 the sending of a communication or a breach of privacy; or an offence which involves, as an integral part of it, or the sending of a communication or breach of a person's privacy. Further guidance can be found in paragraphs 3.3 to 3.13 of CD Code of Practice.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/757850/Communications\_Data\_Code\_of\_Practice.pdf

The IPA has also removed the necessity for local authorities to seek the endorsement of a Justice of the Peace when seeking to acquire CD. All such applications must now be processed through NAFN and will be considered for approval by the independent Office of Communication Data Authorisation (OCDA). The transfer of applications between local authorities, NAFN and OCDA is all conducted electronically and will therefore reduce what can be a protracted process of securing an appearance before a Magistrate or District Judge (see local authority procedures set out in paragraphs 8.1 to 8.7 of the CD Code of Practice).

#### 10. Handling of material and use of material as evidence including retention

Material obtained from properly authorised directed surveillance or a source may be used in other investigations. Arrangements shall be in place for the handling, storage and destruction of material obtained through the use of directed surveillance, a source or the obtaining or disclosure of communications data, following relevant legislation such as the Criminal Procedure and Investigations Act (CPIA).

Authorising Officers must ensure compliance with the appropriate data protection and CPIA requirements, having due regard to the Public Interest Immunity test and any relevant Corporate Procedures relating to the handling and storage of material.

Where the product of surveillance could be relevant to pending or future proceedings, it should be retained in accordance with established disclosure requirements for a suitable period and subject to review.

The following arrangements are in place to ensure that directed surveillance records are held for as long as necessary:

- For cases resulting in no prosecution, all information/records will be held for 3 years at which point it will be removed/deleted from council systems
- For cases resulting in prosecution, information/records will be held for 7 years at which point the information will be removed/deleted from council systems

• The Records Management Team will ensure that the above is monitored and complied with and this will include the deletion of email related records.

#### 11. Training

Officers conducting directed surveillance operations, using a CHIS or acquiring communications data must have an appropriate accreditation or be otherwise suitably qualified or trained.

Authorising Officers will be appointed by the Chief Executive and will have received training that has been approved by the Senior Responsible Officer. The Senior Responsible Officer will have appointed the RIPA Coordinating Officer (SPOC) who will be responsible for arranging suitable training for those conducting surveillance activity or using a CHIS.

All training will take place at reasonable intervals to be determined by the SRO or SPOC, but it is envisaged that an update will usually be necessary following legislative or good practice developments or otherwise every 12 months.

#### 12. Surveillance Equipment

All mobile surveillance equipment is kept in secure premises of each investigation and enforcement team in the Civic Offices. Access to the area is controlled by the relevant team, who maintain a spreadsheet log of all equipment taken from and returned to the area.

#### 13. The Inspection Process

The Investigatory Powers Commissioners Office (IPCO) will make periodic inspections during which the inspector will wish to interview a sample of key personnel; examine RIPA and CHIS applications and authorisations; the central register and policy documents. The inspector will also make an evaluation of processes and procedures.

#### 14. Shared Arrangements

Thurrock conducts Counter Fraud & Investigation activities to protect other public authorities who have no counter fraud function but have an ongoing statutory duty to protect the public funds they administer. In rare instances, where activity governed by RIPA is required to support that Counter Fraud work, only officers employed by Thurrock Council are used to conduct that activity, as the tasking agency. Thurrock therefore follows its own RIPA policy which will result in its Authorising Officers' signing off other agencies RIPA surveillance requests.

#### 15. Social Media and online covert activity

The use of the internet may be required to gather information prior to and/or during an operation, which may amount to directed surveillance. Alternatively an investigator may need to communicate covertly online, for example, contacting individuals using social media websites.

Whenever the council intends to use the internet as part of an investigation, it must first consider whether the proposed activity is likely to interfere with a person's Article 8 rights (Right to respect for private and family life), including the effect of any collateral intrusion. Any activity likely to interfere with an individual's Article 8 rights should only be used when necessary and proportionate to meet the objectives of a specific case.

The use of social media for the gathering of evidence to assist in enforcement activities, must comply with the requirements set out below:

- It is not unlawful for a council officer to set up a false identity but it is inadvisable to do
  so for a covert purpose without authorization. If this is being considered then this must be
  authorised by the Senior Responsible Officer and/or the RIPA Single Point of Contact. Using
  photographs of other persons without their permission to support the false identity infringes
  other laws.
- Where it is necessary and proportionate for officers pursuing an investigation to create a
  false identity in order to 'friend' individuals on social networks, a CHIS authorisation
  must be obtained.
- Authorisation for the use and conduct of a CHIS is necessary if a relationship is established
  or maintained by a council officer (i.e. the activity is more than merely reading of the site's
  content). Where activity is only carrying out a test purchase a CHIS authorisation may not
  be necessary, however this should be confirmed with the Authorising Officer on a case
  by case basis.
- Where privacy settings are available but not applied, the data may be considered open source and an authorisation is not usually required. However privacy implications may still apply even if the subject has not applied privacy settings (see section 3.13 of the Covert Surveillance and Property Interference Code). Advice on this must be obtained from the Senior Responsible Officer and/or the RIPA Single Point of Contact prior to undertaking surveillance.
- Officers viewing an individual's open profile on a social network should do so as infrequently as possible in order to substantiate or refute an allegation.
- Where repeated viewing of open profiles on social networks is necessary and proportionate
  to gather further evidence or to monitor an individual's status, then RIPA authorisation must
  be considered as repeat viewing of "open source" sites may constitute directed
  surveillance on a case by case basis. Any decision not to seek authorisation must be made
  in consultation with an Authorising Officer and that the decision making process should
  be documented.
- Officers should be aware that it may not be possible to verify the accuracy of information on social networks and if such information is to be used as evidence, then reasonable steps must be undertaken to ensure its validity

Please note, sections 3.10 through to 3.17 of the Surveillance and Property Interference Code (and 4.11 to 4.17 of the CHIS Code) provide detailed information in relation to this subject matter.

#### Based on the above:

- All online activity conducted in connection with children's services, enforcement or investigative functions, must be recorded and periodically scrutinised for oversight purposes
- Records of visits by staff to any social media sites must be documented by staff at all times. An example log is shown below (referred to as a Social Media Activity Log)
- The RIPA Single Point of Contact will ensure that service areas are contacted on a quarterly basis, to establish if any on-line activity has been undertaken and if so request the return of the relevant Social Media Activity Logs

#### **Social Media Activity Log:**

Date of Monitoring	Name of individual who is the subject of the monitoring	Was the monitoring a one-off exercise? If not has a directed surveillance request been approved
15/01/2021	Alan Smith	Yes it was a one-off exercise with no additional checks/monitoring required

#### **GLOSSARY OF TERMS**

#### Collateral intrusion

The likelihood of obtaining private information about someone who is not the subject of the directed surveillance operation.

#### **Confidential information**

This covers confidential journalistic material, matters subject to legal privilege, and information relating to a person (living or dead) relating to their physical or mental health; spiritual counselling or which has been acquired or created in the course of a trade/profession/occupation or for the purposes of any paid/unpaid office.

#### **Covert relationship**

A relationship in which one side is unaware of the purpose for which the relationship is being conducted by the other.

#### **Directed Surveillance**

Surveillance carried out in relation to a specific operation which is likely to result in obtaining private information about a person in a way that they are unaware that it is happening. It excludes surveillance of anything taking part in residential premises or in any private vehicle.

#### **Intrusive Surveillance**

Surveillance which takes place on any residential premises or in any private vehicle. A Local Authority cannot use intrusive surveillance.

#### **Legal Consultation**

A consultation between a professional legal adviser and his client or any person representing his client, or a consultation between a professional legal adviser or his client or representative and a medical practitioner made in relation to current or future legal proceedings.

#### Residential premises

Any premises occupied by any person as residential or living accommodation, excluding common areas to such premises, e.g. stairwells and communal entrance halls.

#### Senior Responsible Officer (SRO)

The SRO is responsible for the integrity of the processes in order for the Council to ensure compliance when using Directed Surveillance or CHIS.

#### Service data

Data held by a communications service provider relating to a customer's use of their service, including dates of provision of service; records of activity such as calls made, recorded delivery records and top-ups for pre-paid mobile phones.

#### Surveillance device

Anything designed or adapted for surveillance purposes.

# **List of Authorising Officers**

# **Principal RIPA Officers**

Ian Hunt	Senior Responsible Officer (SRO)		
Assistant Director of Law and Governance & Monitoring Officer			
Matthew Boulter	Deputy SRO		
Deputy Monitoring Officer			
Lee Henley	RIPA Co-ordinating Officer (Single Point of Contact)		
Strategic Lead -Information			
Management			

# **Authorising Officers**

Chief Executive	Authorising Officer
Sean Clark	Authorising Officer
Director of Finance & IT	
Andrew Millard	Authorising Officer
Director of Place	
	Authorising Officer
Jackie Hinchliffe	
Director of HR,OD & Transformation	
Julie Rogers	Authorising Officer
Director Environment and Highways	

## **Briefing Report**

Before any RIPA or CHIS operation commences, all staff will be briefed by the officer in charge of the case using the format of this briefing report. The original will be retained with the investigation file.

RIPA URN
Name and number to identify operation
Date, time and location of briefing
Persons present at briefing

**Information** (Sufficient background information of the investigation to date to enable all those taking part in the operation to fully understand their role).

**Intention** (What is the operation seeking to achieve?).

**Method** (How will individuals achieve this? If camcorders are to be used, remind officers that any conversations close to the camera will be recorded).

**Administration** (To include details of who will be responsible for maintenance of the log sheet and collection of evidence; any identified health and safety issues; the operation; an agreed stand down procedure – NOTE It will be the responsibility of the officer in charge of the investigation to determine if and when an operation should be discontinued due to reasons of safety or cost-effectiveness – and an emergency rendezvous point. On mobile surveillance operations, all those involved will be reminded that at ALL times speed limits and mandatory road signs MUST be complied with and that drivers must NOT use radios or telephones when driving unless the equipment is 'hands free').

**Communications** (Effective communications between all members of the team will be established before the operation commences).

#### Best practice regarding photographic and video evidence

Photographic or video evidence can be used to support the verbal evidence of what the officer conducting surveillance actually saw. There will also be occasions when video footage may be obtained without an officer being present at the scene. However it is obtained, it must properly documented and retained in order to ensure evidential continuity. All such material will be disclosable in the event that a prosecution ensues.

Considerations should be given as to how the evidence will eventually be produced. This may require photographs to be developed by an outside laboratory. Arrangements should be made in advance to ensure continuity of evidence at all stages of its production. A new film, tape or memory card should be used for each operation.

If video footage is to be used start it with a verbal introduction to include day, date, time and place and names of officers present. Try to include footage of the location, e.g. street name or other landmark so as to place the subject of the surveillance.

A record should be maintained to include the following points:

- Details of the equipment used
- Confirmation that the date & time on the equipment is correct
- Name of the officer who inserted the film, tape or memory card into the camera
- · Details of anyone else to whom the camera may have been passed
- Name of officer removing film, tape or memory card
- Statement to cover the collection, storage and movement of the film, tape or memory card
- Statement from the person who developed or created the material to be used as evidence

As soon as possible the original recording should be copied and the master retained securely as an exhibit. If the master is a tape, the record protect tab should be removed once the tape has been copied. Do not edit anything from the master. If using tapes, only copy on a machine that is known to be working properly. Failure to do so may result in damage to the master.

Stills may be taken from video. They are a useful addition to the video evidence.

# Surveillance Log

Daily log of activity, to be kept by each operator or pair of operators.

<ul> <li>A – Amount of time under observation</li> <li>D – Distance from subject</li> <li>V - Visibility</li> <li>O - Obstruction</li> <li>K – Known, or seen before</li> <li>A – Any reason to remember, subject or incident</li> <li>T – Time elapsed between sighting and note taking</li> <li>E – Error or material discrepancy – e.g. description, vehicle reg etc.</li> </ul>
Operation name or number
Date
Time of activity (from) (to)
Briefing location and time
Name of operator(s) relating to THIS log
Details of what was seen, to include ADVOKATE (as above).

# RIPA Authorising Officer's Aide-Memoire

Has the applicant satisfactorily demonstrated proportionality?  Court will ask itself should (not could) we have decided this was proportionate. Is there a less intrusive means of obtaining the same information?  What is the risk – to the authority (loss), to the community of allowing the offence to go un-investigated? What is the potential risk to the subject?  What is the least intrusive way of conducting the surveillance?  Has the applicant asked for too much? Can it safely be limited?  Remember – Don't use a sledge-hammer to crack a nut!  YOUR COMMENTS	Yes	No	
--	-----	----	--

Has the applicant satisfactorily demonstrated necessity (see below)?	Yes	No
<ul> <li>What crime is alleged to being committed?</li> <li>Is the surveillance necessary for what we are seeking to achieve?</li> <li>Does the activity need to be covert or could the objectives be achieved overtly?</li> <li>Does this crime come under the Fraud Act 2006 and if so please state which section of the Act this applies to?</li> <li>Will the offence attract a custodial sentence of 6 months or more? If no, directed surveillance should not be used</li> <li>YOUR COMMENTS</li> </ul>		

What evidence does applicant expect to gather? Has applicant described (a) what evidence he/she hopes to gain, and (b) the value of that evidence in relation to THIS enquiry? YOUR COMMENTS	Yes	No

Is there any likelihood of obtaining confidential information during this operation? If "Yes" operation must be authorized by the Chiel Executive.  Have any necessary risk assessments been conducted before requesting authorization? Details what assessment (if any) was needed in this particular cases. In the case of a CHIS authorization an appropriate bespoke risj assessment must be completed.		
a) have day to day responsibility for the CHIS (a handler)		

Have all conditions necessary for authorization been met to your satisfaction? GIVE DETAILS	Yes	No

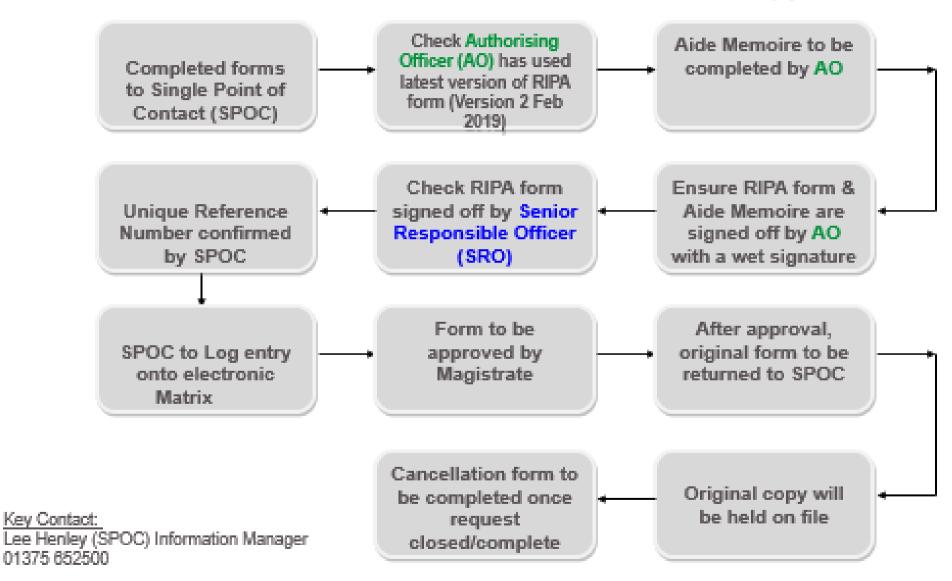
Yes	No

Name (Print)		Grade / Rank	
Signature		Date and time	
Expiry date and time [ e.g.: authorisation granted on 1 April 2011 - expires on 30 June 2011, 23.59 ]			

Remember to diarise any review dates and any subsequent action necessary by you and/or applicant. Return copy of completed application to applicant and submit original to Legal Services. Retain copy.

# RIPA Process

# Appendix 7



8 July 2021		ITEM: 6
Standards and Audit Committee		
Annual Information Governance Report		
Wards and communities affected:	Key Decision: Non key	
Report of: Lee Henley – Strategic Lead Information Management		
Accountable Strategic Lead: Lee Henley – Strategic Lead Information Management		
Accountable Director: Jackie Hinchliffe – Director of HR,OD & Transformation		
This report is: Public		

#### **Executive Summary**

- During 2020/21, the council processed 99% of Freedom of Information (FOI) requests
  within the 20 working day legal timeframe. This is improved performance compared to
  the previous year (97%) and is based on 808 FOI requests that were processed. The
  Information Commissioner expect public authorities to answer at least 90% within the
  legal timeframe so this is a very positive outcome, particularly given the challenges of
  the pandemic and new ways of working across the council.
- The council continues to ensure data is identified for routine publication online. This
  work forms part of the Transparency Agenda and aims to increase openness and
  accountability; whilst reducing unnecessary processing of FOI requests.
- During 2020/21, the council received 84 Subject Access Requests under the Data Protection Legislation. 99% of these requests were processed within the legal timeframe.
- The council continues to drive forward its compliance work programme, following the introduction of the UK General Data Protection Regulation (GDPR) and Data Protection Act 2018.
- Records Management work activity is captured within Appendix 3. Key work areas include embedding an effective use of electronic records management to ensure compliance with the Data Protection Act.

#### 1. Recommendation(s)

1.1 To note the Information Governance and Records Management activity and performance.

#### 2. Introduction and Background

- 2.1 This report provides an update on the following Information Governance areas:
  - Freedom of Information
  - Data Protection
  - Records Management

#### 2.2 Freedom of Information:

2.2.1 During 2020/21, 808 FOI requests were recorded on the council's FOI tracking system. The table below details year-on-year volume and performance data since 2014. Appendix 1 provides additional information on FOI data for the reporting period.

Year	Number of Requests	% responded to in time
2014/15	548	98%
2015/16	980	98%
2016/17	1046	97%
2017/18	1056	96%
2018/19	1093	95%
2019/20	1042	97%
2020/21	808	99%

#### 2.3 **Data Protection:**

- 2.3.1 Subject Access Requests (SAR):
  - The Data Protection Act states that personal information must be processed in accordance with the rights of data subjects. This can result in anybody making a request to the council about any information we hold on them and these are referred to as a SAR. Requests can range from very specific records such as Council Tax, benefits claim history, social care records or to all information held by the council.
  - During 2020/21, the council received 84 SAR requests. Of the 84 requests, 99% (83) were processed within the legal timeframe (1 or 3 months depending on complexity).
  - During 2020/21, the council did not receive any complaints from the Information Commissioners Office regarding the management of SAR's.
  - The table below shows volumes of requests and performance since 2014.

Year	Number of Requests	% responded to in time
2014/15	21	71%
2015/16	43	93%

2016/17	47	83%
2017/18	29	83%
2018/19	83	73%
2019/20	132	97%
2020/21	84	99%

• Appendix 2 provides a breakdown of subject access requests per directorate.

#### 2.3.2 Data Protection Compliance:

 Appendix 2 provides additional information on general Data Protection compliance for the reporting period.

#### 2.4 Records Management:

2.4.1 A records management work programme is in place to drive forward best practice and compliance in relation to the management of electronic and manually held records. Appendix 3 provides additional details regarding Records Management work activity.

#### 3. Issues, Options and Analysis of Options

3.1 There are no options associated with this paper.

#### 4. Reasons for Recommendation

4.1 This report is for noting purposes. There are no recommendations requiring approval.

#### 5. Consultation (including Overview and Scrutiny, if applicable)

5.1 This report was sent to Directors Board.

#### 6. Impact on corporate policies, priorities, performance and community impact

- 6.1 The council has effective systems and processes in place for managing Information Governance.
- 6.2 The council's ability to comply with information governance legislation demonstrates its commitment to openness and accountability. This will allow residents and customers to have a confidence in what we do and will help build trusting relationships.
- 6.3 Access to information can also be closely linked to the Customer Services and ICT Strategies.

#### 7. Implications

#### 7.1 Financial

Implications verified by: Jonathan Wilson

**Assistant Director Finance** 

There are no specific financial implications from the report and the service response is delivered from within existing resources. It is noted there are significant financial penalties for non-compliance with the Data Protection Act.

#### 7.2 **Legal**

Implications verified by: Tim Hallam

Strategic Lead Legal

Given that this is an update report provided for noting purposes there are no legal implications directly arising from it. The following points are of particular note from a Legal compliance perspective:

- FOI failure could result in regulatory intervention as the ICO are now starting to target poor performing councils for FOI which will lead to reputational damage.
- There are various avenues available to the Information Commissioner's Office to address an organisation's shortcomings in relation to the collection, use and storage of personal information. These avenues can include criminal prosecution, non-criminal enforcement and audit. The Information Commissioner also has the power to serve a monetary penalty notice on a data controller.

#### 7.3 **Diversity and Equality**

Implications verified by: Natalie Smith

**Community Development and Equalities Manager** 

There are significant diversity issues for the whole community regarding FOI and Data Protection. The successful implementation of FOI and Data Protection allows our customers, stakeholders, partners and the public to access and receive information.

#### 7.4 Other implications

None

#### 8. Background papers used in preparing the report

None

# 9. Appendices to the report

Appendix 1 – Freedom of Information

Appendix 2 – Data Protection

Appendix 3 – Records Management

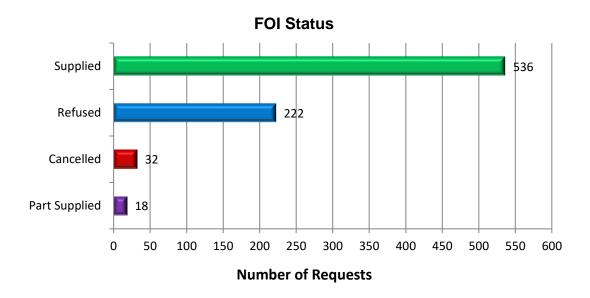
# **Report Author:**

Lee Henley

Strategic Lead Information Management

#### **Freedom of Information**

The chart below shows that of the 808 requests received in during the reporting period, 536 (66%) were supplied with all information requested, 222 (27%) were refused, 32 (4%) were cancelled and 18 (3%) were part supplied.



The chart below shows requests received per Directorate. In addition to this, the FOI themes for the larger Directorates (in terms of FOI volumes) are shown below:

#### Adults, Housing & Health

- House of Multiple Occupation (HMO's)
- Homelessness/Rough sleepers

#### Children's

- Children in Care/Looked after Children's
- Education Services

#### **Environment & Highways**

- Pot holes
- Parking Enforcement

#### Place

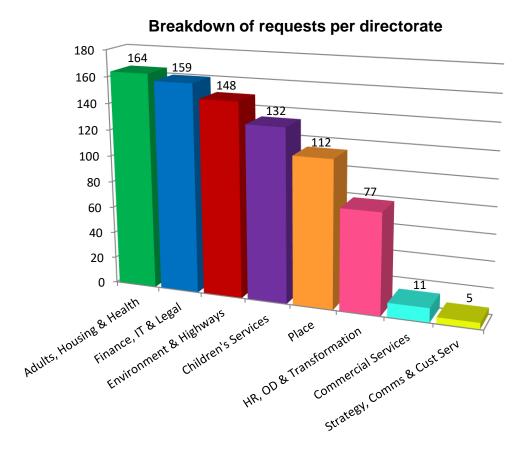
- Noise/nuisance complaints
- Planning enquiries

#### Finance & IT

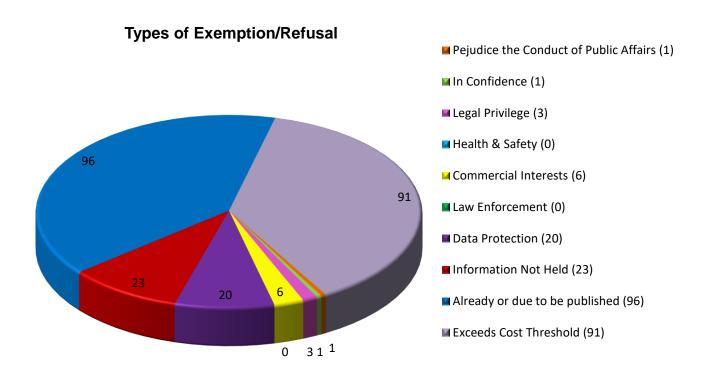
- Business Rates/Covid Support Grants
- Council Tax enquiries

#### HR, OD & Transformation

- Recruitment
- Staff Structures



The chart below shows the type of exemptions and refusals that were applied (based on a total of 240 requests that were part supplied or refused). Please note the chart below does not balance back to 240 as more than one exemption can be applied per request.



The Information Governance Team respond to complaints received regarding FOI. During the reporting period, the council received 3 replies from the Information Commissioner's Office (ICO) regarding previously logged complaints and in all 3 cases the ICO agreed with the council's approach and upheld the exemptions applied. Two of these complaints are now being considered by an Information Rights Tribunal.

The chart below identifies where FOI requests to the council originated from

#### Who FOI requests were made by 353 Private Individual **Business** 304 Charity/Campaigns Journalist/National. **50** Journalist/Local. 28 2 MP/Councillor 50 100 150 200 250 300 350 400 450 500

**Number of Requests** 

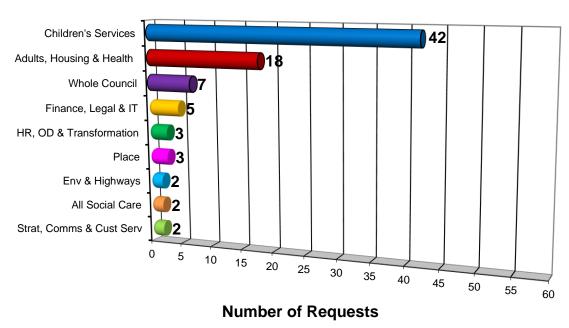
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#### **Data Protection**

#### **Subject Access Requests:**

The chart below highlights the data owner areas for the 84 requests processed within 2020/21.

#### **Subject Access Request - Data Owners**



#### **Data Protection compliance across the council:**

A summary of the new Data Protection Act key changes, along with the progress made by the council to comply with these changes is detailed below:

Key Changes	Progress Made
Organisations must now demonstrate that they comply with the new Act (evidenced based).	<ul> <li>Completed work:</li> <li>A new Data Protection policy is in place</li> <li>A Data Protection Compliance Programme has been produced and refreshed</li> <li>Mandatory Data Protection training has been updated and implemented</li> <li>Engagement with suppliers has taken place - to ensure the council meets the 'right to be forgotten' and "data portability" rights requirements</li> </ul>

	<ul> <li>Contract clauses have been amended</li> <li>Monitoring of Data Protection training has taken place</li> </ul>	
Key Changes	Progress Made	
Significantly increased penalties for any breach of the Act (not just for data breaches) has been introduced.	<ul> <li>Completed work:</li> <li>Mandated training is in place and has been rolled out across the council. Staff have system access removed until training is completed</li> <li>A Data Protection Compliance Programme has been produced and has been refreshed</li> </ul>	
A legal requirement is now in place for security breach Notification to the Information Commissioners Office.	Completed work:     The council's security incident reporting procedure has been refreshed, which will result in certain breaches being reported to regulatory bodies	
Data Protection Impact Assessments (DPIA) are now required for high risk processing and/or when using new technologies.	Completed work:     A DPIA process has been produced and implemented     The DPIA procedure is part of the procurement process	
Specific requirements for transparency and fair processing must be adhered to.	<ul> <li>Completed work:</li> <li>A detailed guide on information rights has been produced and is available on our website</li> <li>A layered approach to privacy notices has been implemented</li> </ul>	
Tighter rules are in place where consent is the legal basis for processing personal data.	<ul> <li>Work to be completed:</li> <li>As part of the Information Governance (IG) Group work, checks are being undertaken to review how the council are obtaining and recording consent and whether the council need to make any changes.</li> </ul>	
Requirement to keep records of data processing activities.	Work to be completed: Work is on-going (and this will always be fluid due to new systems implemented) by our Information Governance Group to compile a robust Record of Processing Activity.	

#### **Appendix 3 – Records Management**

## **Records Management**

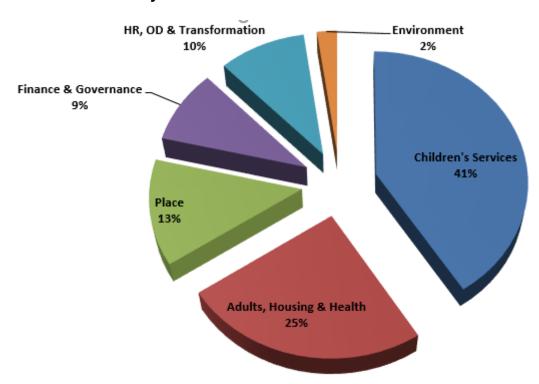
#### **Policies & Procedures:**

All records management policies and guidance have been reviewed and revised as necessary.

#### **Physical Records:**

The chart below highlights the data owner areas for the 9,539 physical archive boxes currently in offsite storage. Work on this has slowed down due to Covid/Agile working arrangements.

#### **Physical Archive Boxes - Data Owners**



#### **Project figures from inception** (May 2017)

A reduction of 2,694 boxes A cost saving of £83,686

#### Financial Year 2020-2021

A reduction of 225 boxes from 2019/20 Costs of storage = £21,883 (reduction of £2,249 from 2019/20) This project has been impacted this year due to Covid and Agile working arrangements. However progress is still being made regarding the disposal of data which has reached its retention period plus digitisation of relevant data.

#### **Electronic Records:**

The Records Management team have been working to reduce the volume of data without assigned disposal review triggers.

Electronic workflows have been created in the records management system (Objective) to identify files which have reached or exceeded their retention period (as defined by the disposal review trigger and corporate disposal schedule). Review tasks are then assigned to the relevant data managers. 295 disposal reviews have resulted in 214 authorised file deletions to date.

#### **Objective Home areas:**

Home area storage causes operational, business continuity and compliance concerns for the council. With this in mind:

- Objective server settings have been periodically changed to reduce the number of documents allowed to be stored within Home areas
- A limit has been set to ensure individuals do not store more than 100 documents within their Home area
- Regular reminders are issued to all users exceeding 90% of personal storage limit

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8 July 2021		ITEM: 7
Standards and Audit Committee		
Counter Fraud & Investigation Annual Report & Strategy		
Wards and communities affected:	<b>Key Decision:</b> N/A	
Report of: Michael Dineen, Strategic Lead for Counter Fraud		
Accountable Assistant Director: David Kleinberg, Assistant Director for Counter Fraud, Investigation & Enforcement		
Accountable Director: Julie Rogers, Director of Public Realm		
This report is Public		

#### **Executive Summary**

The Counter Fraud & Investigation (CFI) team is responsible for the prevention, detection and deterrence of all instances of alleged fraud and economic crime affecting the authority including: allegations of fraud, theft, corruption, bribery and money laundering.

The work of the service is led by the annual Counter Fraud Strategy which is approved following consultation with the council's services and intelligence from partners in government and policing.

This report outlines the performance of the team over the last year as well as proposes the new Counter Fraud strategy to tackle fraud for the council in 2021/22.

#### 1. Recommendations

- 1.1 The Standards and Audit Committee notes the performance of the Counter Fraud & Investigation team over the last year.
- 1.2 The Standards and Audit Committee approves the Counter Fraud & Investigation strategy and work programme for 2021/22.

#### 2. Introduction & Background

2.1 The council's CFI team is responsible for delivering the corporate counter fraud programme which includes proactive activity to enhance the council's controls as well as respond to intelligence from that proactive work and information from other sources.

- 2.2 The team was reorganised in early 2015 where enhanced measures and capabilities to prevent, detect and deter attacks from criminality were installed. Those measures include digital forensic capabilities to respond to the changing environment as well as criminal finances, to investigate, seize and confiscate criminal assets.
- 2.3 Since the Counter Fraud & Investigation team was re-launched in 2015 it has received £6,181,314 of council funding but detected £16,677,582 of fraud. During that same period the CFI service has also returned £6,665,474 of realisable cash back in to council finances.

#### 3. Performance

- 3.1 CFI can comment on the following statistics for the previous year (2020/21):
  - 302 reports of suspected fraud have been received
  - 254 Investigations have been undertaken by CFI
  - 203 Investigations were closed by CFI
  - 51 active investigations are currently being conducted
  - The value of open investigations is £719,050
  - Detected Fraud (prosecuted or awaiting judicial outcomes) can be seen in the table below:

Fraud Type	Number of cases	Value of Offences
Housing	8	£300,000
Social Care	1	£24,000
Money Laundering*	1	£1,800,000
Right to Buy	1	£84,200
Grants	2	£90,000
Worker	7	£10,700
Total	20	£2,298,200

- 3.2 The detailed annual report shown in **Appendix 1** provides the background to these figures as well as the overall programme of work delivered by the service in the last year.
- 3.3 It is clear that the pandemic has reduced the traditional work that CFI would complete during a year, however that has not meant the CFI team haven't assisted in the fight against fraud. Due to the pandemic the government announced a number of grants that were to be administered by local authorities, these were collectively known as Business Support Grants (BSG).
- 3.4 The CFI team have worked closely with the Revenues team (those responsible for administering the grants) to complete pre and post assurance checks on all applications that were received.

- 3.5 The CFI have completed the following pre/post assurance checks:
  - 813 checks completed
  - 61 applications refused
  - 147 applications required further documentation
  - 605 applications processed and paid
- 3.6 The preventative counter fraud work saw 61 grant applications investigated and stopped, saving over £600,000 of potential losses of public funds.

#### 4. Work Plan for 2021/22

- 4.1 CFI has a programme of proactive work proposed to ensure the council's posture against fraud is robust and effective. **Appendix 1** sets out the proposed proactive work programme this year.
- 4.2 The work programme is a working document and if during the year changes or additions to the plan are proposed between the CFI and the Section 151 Officer, these will be brought back to the Committee for approval.
- 5. Reasons for Recommendation
- 5.1 This report provides a detailed update to the Committee on the improved counter-fraud measures for the Council and how it is reducing fraud under the council's counter-fraud strategy.
- 6. Consultation (including Overview and Scrutiny, if applicable)
- 6.1 All Directors and Heads of Service were consulted with the new strategy to be taken by the Council in its anti-fraud approach.
- 7. Impact on corporate policies, priorities, performance and community impact
- 7.1 Work undertaken to reduce fraud and enhance the Council's anti-fraud and corruption culture contributes to the delivery of all its aims and priorities supporting corporate governance.
- 8. Implications
- 8.1 Financial

Implications verified by: Jonathan Wilson

**Assistant Director, Corporate Finance** 

This report shows the financial implications within **Appendix 1.** 

#### 8.2 **Legal**

Implications verified by: **Deirdre Collins** 

**Barrister, Law & Governance** 

The work completed by CFI assists the council with its legal obligations as noted below:

The Accounts and Audit (England) Regulations 2015 section 4 (2) require that:

The relevant body shall be responsible for ensuring that the financial management of the body is adequate and effective and that the body has a sound system of internal control which facilitates the effective exercise of that body's functions and which includes the arrangements for the management of risk.

#### 8.3 Diversity and Equality

Implications verified by: Roxanne Scanlon

**Community Engagement and Project Monitoring Officer, Adults, Housing & Health** 

There are no diversity or equality issues within this report.

8.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None.

**9. Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

#### 10. Appendices to the report

Appendix 1 – CFI Annual Report 2020/21 & Annual Strategy & Work Plan for 2020/21

#### **Report Author:**

Michael Dineen

Strategic Lead

Counter Fraud & Investigation

# **Counter Fraud** & Investigation







See it.

Report it. Stop it.

# **Counter Fraud Annual Report 2020/21**

Strategy & Work Plan 2021/22



# **Foreword**

"This year has brought significant wide-ranging challenges for Thurrock and the country as a whole. We began our Emergency Management response – enacting plans to protect the most vulnerable and ensure support was accessible to anyone who needed it.

In Thurrock, the council delivered the government's strategy implementing local restrictions and administering schemes to protect the local economy through funding to business in financial grants to support their closure.

The CFI team supported and developed plans to ensure those support schemes could be delivered, preventing the loss of over £600k of public finance.

As the country enters the next phase of Emergency Management in recovery, the CFI team will be focusing its efforts to protect those schemes in addition to the normal council service delivery.

**David Kleinberg,**Assistant Director for Counter Fraud, Investigation and Enforcement

# **Performance and Partnerships**

Our key role is to protect Thurrock and Castle Point Councils from fraud and economic crime and has been since 2014, however, in 2019 we saw growth in our national capability providing expertise to other public bodies to reduce economic crime, which has seen us work with a number of police agencies across the UK and complete work on behalf other local authorities.

In 2020/21 this grew even further with the expansion of our national capability, The National Investigation Service (NATIS), whom formed a working collaboration with The Department of Business, Energy and Industrial Strategy (BEIS) as well as a collaboration with the Cabinet Office. These collaborations have seen NATIS at the forefront of the fight against fraudsters who have attacked the Covid-19 stimulus schemes that the government have announced over the last year. This includes those that have directly affected Local Governments, such as the Business Support Grants.

Through the great work of those involved the collaborations have gone from strength to strength and is to continue into 2021/22.

#### **CFI** activity since its launch



£40m Detected Fraud



£9m Recovered from Criminals



Over 100
Public
Bodies
Supported



180
Insider Threats
Identified



23
Organised Crime
Groups (OCGs)
Disrupted



26 Police Forces Supported

# **Governance & Accountability**

The provision of a national capability brings with it national responsibilities and oversight. Recognising our role and responsibilities, we sought assistance from national bodies to implement an appropriate inspection regime to provide assurance over our work.

The governance structure overseeing the directorate's work is now formed of several independent bodies:

#### Local & Central Government - Standards & Audit Committees

 Monitoring of Performance against each annual strategy for the bodies to provide assurance of crime risk and organisational governance

# **Investigatory Powers Commissioner's Office**

 Inspections to monitor the use of investigative tactics regulated by the Regulation of Investigatory Powers Act 2000, Investigatory Powers Act 2016 and Human Rights Act 1998

## **Home Office - National Police Information Risk Management Team**

• Inspections to monitor the security of data used in the department

## **College of Policing**

 Delivery of Accredited programmes for all the officers in the directorate, including Professionalising Investigation Practice (PIP) & Intelligence Professionalisation Programme (IPP) accreditations

#### **Crown Prosecution Service**

 Conduct reviews of Criminal Investigation casework prior to accepting for prosecution, held to the Crown Prosecutors Code as well as Police & Criminal Evidence Act and Criminal Procedure Act 1984 & Investigations Act 1996

#### **UK Forensic Science Regulator**

• The Regulator ensures that the provision of forensic science services by CFI across the criminal justice system is compliant to an appropriate regime of scientific quality standards.

# **Governance & Accountability**

## **National Crime Agency – Proceeds of Crime Regulator**

• CFI uses a number of powers afforded by Parts 2, 5 and 8 of the Proceeds of Crime Act 2002. The National Crime Agency is the regulator of these powers. An inspection in to CFI's use of the powers will take place in July 2018.

#### **UK Accreditation Service**

 CFI has its own forensic laboratory to deal with digital media, recovering material from electronic devices for use in in criminal or civil outcomes. All laboratories conducting this work in the UK must now be accredited to ISO17025 (International Standards). CFI has worked towards this accreditation for 2 years. This year the final inspection will take place to accredit CFI's laboratory to ISO17025 standards.

# **Finances**

The Counter Fraud & Investigation is the Thurrock Council service that protects the council from fraud and economic crime. In addition the service also provides a full Counter Fraud Service to Castle Point Borough Council and other Housing Associations. Other partners can join the service with a financial contribution or with the secondment of its staff into the team.

In some cases where CFI is providing a partner's on-site counter fraud resource CFI will have an 'on-site' budget to maintain the counter fraud & investigation operations for that partner. The National Investigation Service is commissioned by external partners of which the funding is pre-agreed and the contribution is controlled by ongoing agreements

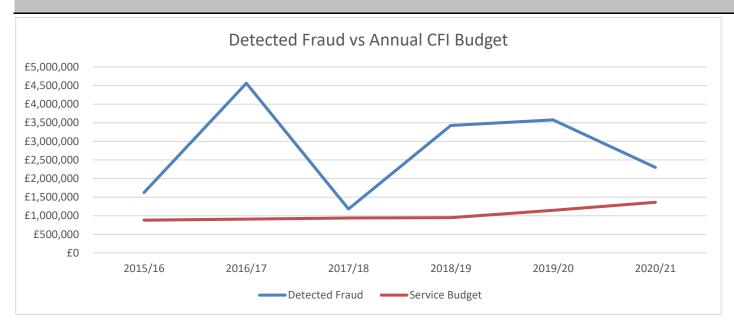
# Overall CF&I Budget 2019/20

	Contributor	Contribution
	Other public bodies	£56,979
	Thurrock Council	£1,360,983
	Castle Point Council	£64,000
Total Budget		£1,481,962

#### **Finances**

# Return on Investment (2015-2021) Thurrock Council

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
Detected Fraud	£1,622,604	£4,562,032	£1,179,987	£3,426,474	£3,578,285	£2,298,200
Service Budget	£880,637	£909,556	£939,313	£945,876	£1,144,949	£1,360,983
Income	(£701,418)	(£3,729,705)	(£889,097)	(£941,155)	(£205,334)	(£198,755 <sup>1</sup> )



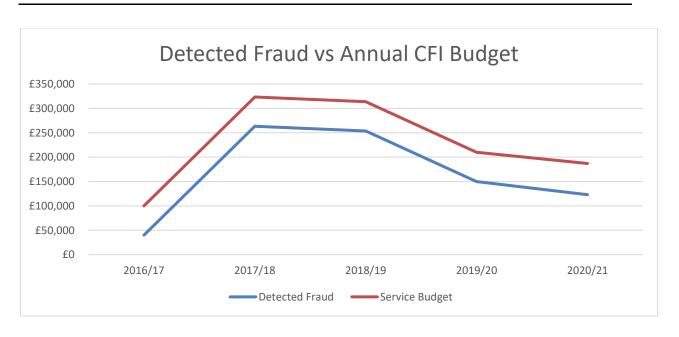
Since the Counter Fraud & Investigation team was revised in 2015 it has received £6,181,314 of council funding but detected £16,677,582 of fraud. During that same period the CFI service has also returned £6,665,474 of realisable cash back in to council finances.

<sup>&</sup>lt;sup>1</sup> This figure represents the available assets which can be ordered to be paid back by criminals to the council under the Proceeds of Crime Act 2002 or civil remedy, which is different to the amount of fraud that was proven at court.

# **Finances**

# Return on Investment (2016-2019) Castle Point Borough Council

	2016/17	2017/18	2018/19	2019/20	2020/21
Detected Fraud	£40,000	£263,400	£253,800	£149,900	£123,000
Service Budget	£60,000	£60,000	£60,000	£60,000	£64,000



# **Operational Activity**

# **Social Housing Fraud**

Last year 2 social housing properties were recovered by the team in 2020/21 as COVID affected the efficiency and strategy of the housing fraud teams as well as the government decision stop any evictions for most of last year.

Although this number is low, all intelligence that the CFI received has been retained and the CFI are to take action against these referrals in 2021/22. Recovering properties lost due to fraud and preventing further housing stock being lost ensures the use of temporary accommodation for those in need is reduced and remains a priority.



2
Social Housing
Properties Recovered

#### **Case Example**

In October 2020 the CFI received an allegation of an abandoned property in Grays with mounting rent arrears. From investigations it became clear the occupant hadn't resided for some months and a property which could have been provided to a deserving family was sitting vacant.

The CFI carried out extensive enquiries and tracked the occupant down to another address out of the area. The CFI team acted quickly in engaging with occupant and instigating proceedings to recover the property, the occupant realised their position was untenable and signed the property back over to Thurrock. This enabled the property to enter the housing stock. This was not against the governments 'no eviction' policy as the property was voluntarily given back to the authority by the tenant after engagement with CFI.

# **Operational Activity**

#### **Insider Threats**

The sad reality for any large organisation is the small minority of individuals who seek to take advantage of the trust their employer places in them. It is of some comfort that these cases are extremely rare but where fraud or corruption does occur, CFI has the expertise and experience to resolve any allegations swiftly and professionally reducing the potential impact on frontline service delivery. CFI works closely with business areas in each partner agency as well as its Executive and Human Resources teams in a collaborative approach.

#### **Case Example**

CFI have worked with a department within the council that identified a member of staff the management believed to be stealing fuel. The CFI team acted quickly and efficiently analysing the data recovered from the location software of the vehicles concerned and overlaid this with transactional data and CCTV recovery to enable officers, working with the police, to arrest and interview the suspect. Given the weight of evidence, the suspect admitted to the thefts and frauds and was dismissed from the council.

A temporary housing manager manipulated and created false documents to gain a friend a temporary housing solution. This was identified and the documents uploaded to gain the housing were analysed and through enquires with the companies quoted it was established by the team that these were fraudulent. Again, working with the police the suspect was arrested and interviewed, with him being dismissed after the interview

# **Operational Activity**

#### **Grant Fraud**

#### **Case Example**

The CFI team were informed of an £80,000 payment that was made by the local authority on behalf of the Department of Business, Energy and Industrial Strategy. The team were able to identify the bank account the money was paid into and subsequently laundered onwards to from that account.

This identified a suspect in Scotland, which, alongside policing partners, became challenging in the middle of a pandemic. However, the team identified the address of the suspect and gained a search warrant for the address. This was executed and the suspect was arrested and interviewed by the team, after which, a case was presented to the Crown Prosecution Service for Money Laundering and a charge is expected imminently.

# **Joint Working**

CFI works closely with policing partners and other law enforcement bodies to protect the public purse. Intelligence is lawfully shared under statute, including the new Data Protection Act 2018 where crime is suspected.

CFI's Criminal Intelligence Bureau works closely with law enforcement to develop intelligence that will assist in protection of the public. Over the last year 48 Alerts and guidance notes were disseminated by CFI across all our local authority and public partner service areas.

The Criminal Intelligence Bureau has also disseminated **159 Intelligence Reports** to other agencies to assist with their criminal investigations.

CFI's specialist expertise has been used by other local authority services to protect the public including tactical support to other enforcement teams in Planning, Trading Standards and Housing to Human Resources, Procurement and ICT.

#### Results

The Counter Fraud & Investigation team's work has been affected by C19 and as a result have seen a stark decline in referrals and the ability to conduct investigations in the normal crime areas. The CFI team enacted their own plans supported wider-council services who changed their normal operating models to support the vulnerable, identifying other areas of investigation/action that could assist in the fight against those committing crime during the pandemic.

In the early days of the pandemic, no staff were actively targeting crime in the traditional sense as home visits and interviews were suspended. This lead CFI to start Operation Alexis, which saw the CFI work 24 hours a day 7 days a week (shift rotas) patrolling high risk council buildings and or areas that were highlighted as being vulnerable by other council departments. In all, over 2000 checks were completed by the team with 55 unsecure premises calls being made ensuring council property was protected, even when empty.

During one night duty patrol (A13), officers from CFI, called on the police as they identified a driver who was driving dangerously and who they believed, was driving under the influence of alcohol. They followed the vehicle, keeping a safe distance themselves, into Kent before police officers stopped the vehicle and the suspect was arrested and prosecuted for drink driving.

The following gives results for the work CFI completed on behalf of Thurrock Council

- 302 reports of suspected fraud have been received
- 254 Investigations have been undertaken by CFI
- 203 Investigations were closed by CFI
- 51 active investigations are currently being conducted
- The value of open investigations is £719,050

Detected Fraud (prosecuted or awaiting judicial outcomes) can be seen in the table below:

Fraud Type	Number of cases	Value of Offences
Housing	8	£300,000
Social Care	1	£24,000
Money Laundering	1	£1,800,000
Right to Buy	1	£84,200
Grants	2	£90,000
Worker	7	£10,700
Total	20	£2,298,200

It is clear that the pandemic has reduced the normal levels of work that CFI would complete during a year, however that has not meant the CFI team haven't adapted in the fight against fraud. Due to the pandemic the government announced a number of grants that were to be administered by local authorities, these were collectively known as Business Support Grants (BSG).

The CFI team have worked closely with the Revenues team (those responsible for administering the grants) to complete pre and post assurance checks on all applications that were received.

The CFI have completed the following pre/post assurance checks

- 813 checks completed
- 61 applications refused
- 147 applications required further documentation
- 605 applications processed and paid

The preventative counter fraud work saw 61 grant applications investigated and stopped, saving approximately £600,000 of potential losses of public funds.

#### **Statistics**

The following tables detail the investigations, sanctions and compliance activities completed by the team across partners for 2020/21. This year is starkly different to previous years due to the COVID19 pandemic and various lockdowns the team have worked under.

It is anticipated that figures will return to previously seen levels in 2021/22.

# **Comparison to Previous Years**

The table below shows the number of investigations completed year on year, over the last 5 years

Year	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
Number of reports of Fraud	514	302	324	576	349	302

# **Comparison to Previous Years (detected fraud)**

The table below shows the detected fraud value year on year since the inception of the Counter Fraud & Investigation team.

Year	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
Detected Fraud Value	£8,768,957	£6,958,808	£5,138,836	£5,497,805	£3,578,285	£2,298,200

The total value of fraud detected from April 2014 to March 2021 is £35,880,818, although this has not grown significantly, this was due to the pandemic and courts remaining open for emergency and high risk cases only, it is anticipated this will return to 'normal' levels in 2021/22.

# Delivery of the Proactive Work Plan 2020/21 (Thurrock Council)

Risk Area	Activity	When	Current Status	Responsible Officer
Council- wide	Application of Counter Fraud Risk Analytics across the council's 10 threat areas.  This work will commence with sampling exercises, fraud loss measurement programmes and testing of analytic tools across those high-risk areas.	2021 – 2022	This system is now in place and the material can be uploaded to the system, which will in turn look for patterns of offending and any linked indices that will assist in identifying unknown fraud/criminality.	Michael Dineen
Council- wide	Install improved Anti-Money Laundering (AML) controls at all of the council's Customer Contact Points.  Fraud, Bribery, Corruption and Money Laundering are intrinsically linked by a common theme – persons and businesses being compromised by crime. That may be intentional or unintentional (e.g. stolen identities (unintentional) or fictitious businesses (intentional)	June 2022 To May 2021	This has been completed however there is a cost implication to the platforms it is added to. This will be discussed with the appropriate strategic leads for final confirmation on which platforms this will run.	David Kleinberg
Revenues & Treasury	COVID-19 Business Grants Counter Fraud Programme  The council has awarded £19m of government grants to businesses during the COVID-19 pandemic. The team will be using the Counter Fraud tools provided by the Cabinet Office and commercial sector to assure the payment already made and prevent future frauds.	June 2022 To May 2021	As reported in Q3 this is an ongoing piece of work but has currently saved approximately £300,000 in payments. The CFI will continue with this work when required.	Dave Nash
Council- wide	Renewed Education & Marketing Campaign for Countering Fraud, Bribery, Corruption and Money Laundering	March 2021	This unfortunately has been moved due to the restrictions placed on the service due to COVID-19. CFI are delivering training to officers but this is not as extensive as the initial planning intended.	Nicholas Coker

# **Delivery of the Proactive Work Plan 2020/21 (Castle Point Council)**

Risk Area	Activity	When	Current Status	Responsible Officer
Council- wide	Counter Fraud Training	December 2020	This training has been taking place during lockdown and will continue into the next years' work plan as this is ongoing education	Phil Butt
Council- wide	Review & Update Counter Fraud, Bribery and Corruption Guidance	Expected in year	Being presented for approval at AC	Michael Dineen
Council- wide	Review & Update Counter Money Laundering Policy	Expected in year	Being presented for approval at AC	Michael Dineen
Council- wide	Review & Update Whistleblowing Policy	Expected in year	Being presented for approval at AC	Michael Dineen
Council- wide	Create an NFI working group to maintain the council's proactive response to data matches.	From April 2020	NFI meetings now take place and the process is becoming smoother. This will in turn allow for more investigations to take place by CFI.	Nick Coker
Council- wide	Cyber-crime risk assessment across the council.	March 2021	This has been written and await confirmation from the new ICT supplier they are happy with this.	David Nash
Council- wide	Provide a Cyber Incident Response Policy	March 2021	This has been written and await confirmation from the new ICT supplier they are happy with this.	David Nash

Council- wide	Review the last 5 years of Right to Buy purchases against the restrictions in place.	March 2021	It was established that Land Registry place 'charges' on properties sold by the council in the appropriate way and therefore no anomalies were found.	Nick Coker
Council- wide	Review the last 5 years of successions against intelligence data.	March 2021	This work flow has been pushed to 2020/21 work plan due to the restrictions on visits to property. In 2020/21 this will be different and CFI will be looking to establish of any of the results create a fraud marker.	Nick Coker

# Counter Fraud Strategy 2021/22

#### **Our Fraud Control Strategy**

Last year we installed our control strategy which defined how we would be working moving forward. This continues into 2021/22 and is an effective strategy to ensure all of our actions are considered and justified.

The Counter Fraud & Investigation team's work with the National Investigation Service ensures that we are able to identify at an earlier stage intelligence relating to the key priorities below, particularly those affecting the most vulnerable of society.

#### Who are We?

A specialist function to protect public finance from fraud and serious crime, using our legal framework as a local authority service

# What is Our Purpose?

- 1 Protect the public purse from crime
- Support the wider-public sector with shared, advanced capabilities

### What are Our Priorities?

Crimes affecting a vulnerable adult or child

Insider threats in local government

Organised crime targeting local government

Improving local government's resilience to cyber crime

### How do we Succeed?

Always acting Ethically in everything that we do, working to our values, attitudes and principles

Consider opportunities to work collaboratively with others for the benefit of our purpose, sharing our knowledge, experience and expertise

Apply the 4 'P' Strategy to Prevent, Protect and Prepare local government for economic crime, pursing offenders where necessary

Ensure our teams are fully equipped to respond to the threats faced from economic crime

# **Proactive Work Plan**

Risk Area	Activity	When	Current Status	Responsible Officer	Date Complete
Council-wide	Training of high risk areas in counter fraud measures	June 2021		Phil Butt	
	Ensure understanding of the threats posed to those areas.	То			
	To be tailored to the areas and ongoing support offered via a Single Point of Contact with CFI	May 2022			
Council-wide	Review all relevant policies concerning fraud aspects	Jan 22		Michael Dineen	
	Ensuring that all hold the most up to date legislative information as well as ensuring best practice is always adhered to.				
Revenues &	COVID-19 Business Grants Counter Fraud Programme	June 2022		David Nash	
Treasury	The council has awarded £19m of government grants to	То			
	businesses during the COVID-19 pandemic. The team will be using the Counter Fraud tools provided by the Cabinet	May 2021			
	Office and commercial sector to assure the payment already made and prevent future frauds.				
	(Continued from 2020/21 due to ongoing grants)				
Council-wide	Renewed Education & Marketing Campaign for Countering Fraud, Housing Fraud, Insider Threats and Corruption	Dec 2021		Nicholas Coker	
Council-wide	Targeting POCA and Civil Legislation to maximise effect on criminal behaviour	June 2022		Roger Noakes	
	Ensure that CFI utilise the appropriate legislation to maximise the effects on criminals and ensure that our vision of protecting the public purse is adhered to by promoting this work.				

8 July 2021	ITEM: 8			
Standards and Audit Committee				
Chief Internal Auditor's Annual Report – Year ended 31 March 2021				
Wards and communities affected: Key Decision:				
All	Non-key			
Report of: Gary Clifford – Chief Interna	Il Auditor			
Accountable Assistant Director: lan	Hunt – Assistant Directo	r Law & Governance		
Accountable Director: Sean Clark – Corporate Director of Resources & Place Delivery				
This report is public				

#### **Executive Summary**

Under the Public Sector Internal Audit Standards, the Chief Internal Auditor is required to provide the Section 151 Officer and the Standards & Audit Committee with an opinion on the adequacy and effectiveness of the organisation's governance, risk management and control arrangements. In giving this opinion it should be noted that assurance can never be absolute. The most that the internal audit service can provide is a reasonable assurance that there are no major weaknesses in the risk management, governance and control processes.

The audit opinions that are provided on a review by review basis during the year and are presented to the Standards & Audit Committee as part of the regular internal audit progress reports, form part of the framework of assurances that assist the council in preparing an informed annual governance statement.

This year has been particularly different and challenging to all services provided by the Council due to the Coronavirus COVID-19 pandemic and has had an impact on getting responses back from clients on operational issues and to draft reports. This impacted on the total number of assurance reports issued as final. However, the Chief internal Auditor has taken this into account when reaching his judgement on the overall opinions he has given around the Governance, Risk Management and Internal Control frameworks.

During 2020/21, one of the team worked full time with Thurrock Coronavirus Community Action from April to July 2020 to help provide assistance to vulnerable and shielding adults. We also had a Senior Internal Auditor take retirement in June 2020. This clearly impacted on the services' resources. This is an issue that will be addressed during 2021/22.

#### 1. Recommendation(s)

1.1 That the Standards and Audit Committee considers and comments on the Chief Internal Auditor's Annual Report – Year ended 31 March 2021.

#### 2. Introduction and Background

- 2.1 The role of internal audit is to provide management with an objective assessment of the adequacy and effectiveness of internal control, risk management and governance arrangements. Internal audit is therefore a key part of Thurrock Council's internal control system and integral to the framework of assurance that the Standards & Audit Committee can place reliance on to assess its internal control system.
- 2.2 The Accounts and Audit Regulations 2015 require that 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. This responsibility has been delegated to the Corporate Director of Resources & Place Delivery (Section 151 Officer previously Corporate Director of Finance, Governance & Property) under the Council's Executive Scheme of Delegation and is delivered through the Chief Internal Auditor in consultation with the Director of Finance & IT.
- 2.3 In April 2013, a revised standard for Public Sector Internal Audit Standards (PSIAS) came into effect, compliance against which is seen as fundamental to demonstrating the adequacy and effectiveness of internal audit, in order to meet statutory requirements as set out in the Accounts & Audit (England) Regulations 2015. The procedures and practices that Internal Audit operates at Thurrock are designed to reflect adherence to these standards.
- 2.4 The provision of assurance services is the primary role for internal audit in the UK public sector. This role requires the Chief Internal Auditor to provide an annual internal audit opinion based on an objective assessment of the framework of governance, risk management and control. Consulting services are advisory in nature and are generally performed at the specific request of the organisation, with the aim of improving governance, risk management and control and contributing to the overall opinion.

#### 3. Issues, Options and Analysis of Options

3.1 During 2020/21, we issued 11 assurance reports, all of which received positive assurance opinions. We also issued 4 advisory reports on Project Management, Business User Allowance and the work around the BSI ISO 9001 Standards within Environment on Fleet and Country Parks. In addition, ad hoc work was also carried out to investigate complaints relating to concerns raised by management at a sheltered housing complex, a complaint around the awarding of a contract following a procurement exercise and

- checks of claims made as part of the Troubled Families Programme. There has also been a noticeable increase in the number of grant returns, particularly those relating to COVID funding for the Council, its businesses and residents, which require formal review and sign off by the Chief Internal Auditor. This is expected to increase during the next year.
- 3.2 During 2020/21, internal audit conducted a desktop review of the Register of Gifts, Interests and Hospitality for senior officers and members and all were up to date. Due to concerns around major projects and their governance arrangements, the council brought in a specialist consultancy firm to review one of the major projects. This work was carried out during March/April 2020 and recommendations made to improve oversight and governance of the contract. In addition, and at their request, the Standards & Audit Committee have been regularly updated on the performance and financial issues around the major projects. We have also looked at the governance arrangements in specific areas of the council's operations and where we have identified issues, the council has reacted swiftly to address them. The Council also reviewed its project management methodology and piloted a new project management process. This work is on-going but was reviewed by Internal Audit as part of its planned work during 2020 and recommendations made which were accepted by management. As the project management and major contract work is on-going, our overall opinion on governance for 2020/21 remains the same as the previous year which is Amber.
- 3.3 In 2017/18, internal audit undertook a review of the council's risk management maturity. As a result of this work, we concluded the council was a **Risk**Managed organisation. This is a positive result and continues to be in line with the Corporate Insurance & Risk Manager's self-assessment review which was reported to the Standards & Audit Committee in March 2021. For 2020/21, our opinion was that the risk management continued to be robust, particularly at the strategic level and work to improve it at the operational level continues. In respect of the council's Risk Management arrangements, we have concluded that there has been no significant change from last year with regular reports being provided to the Standards & Audit Committee so we have given a **Green** opinion rating.
- 3.4 In total, all 11 assurance reports we issued received a positive (Green or Amber/Green) assurance opinion. As stated at 3.1 above, we also issued 4 Advisory reports. Whilst advisory reports do not provide a specific assurance opinion, they do contain recommendations and provide assurance around operations. Ad hoc work was also carried out to investigate complaints relating to concerns raised by management at a sheltered housing complex, a complaint around the awarding of a contract following a procurement exercise and checks of claims made as part of the Troubled Families Programme. The work is continuing around the major contracts and projects so our overall opinion for 2020/21 remains the same as 2019/20 which is Amber.

#### 4. Reasons for Recommendation

4.1 The Chief Internal Auditor's Annual Report – Year ended 31 March 2021 is presented for the Standards & Audit Committee to consider and comment on and supports the council's Annual Governance Statement.

#### 5. Consultation (including Overview and Scrutiny, if applicable)

5.1 The Chief Internal Auditor's Annual Report – Year ended 31 March 2021 provides an independent opinion on the council's governance, risk management and internal control processes. There is no consultation as it is based on work completed during the year which is widely reported to officers and members.

# 6. Impact on corporate policies, priorities, performance and community impact

6.1 The achievement of corporate priorities is a key consideration of the Corporate Directors, senior management and internal audit when they are planning the years' work. A positive opinion in the Chief Internal Auditor's Annual Report provides an independent assurance that the council has adequate control and risk management processes in place.

#### 7. Implications

#### 7.1 Financial

Implications verified by: Jonathan Wilson

**Assistant Director Corporate Finance** 

There are no direct financial implications arising from this report.

#### 7.2 Legal

Implications verified by: Tim Hallam

Strategic Lead - Legal

There do not appear to be any direct legal implications arising from this report and appendices. The contents of this report and appendixes form part of the Council's responsibility to comply with the Local Audit and Accountability Act 2014 and the Accounts and Audit Regulations 2015. These duties include to at least annually 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. The Council has delegated responsibility for ensuring this is taking place to the Standards & Audit Committee.

#### 7.3 **Diversity and Equality**

Implications verified by: Roxanne Scanlon

**Community Engagement and Project** 

**Monitoring Officer** 

There are no direct diversity implications arising from this report.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

In terms of risk and opportunity management, the Chief Internal Auditor's Annual Report and its outcomes are a key part of the council's risk management and assurance framework.

**8. Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

Internal Audit Reports issued in 2020/21.

#### 9. Appendices to the report

Appendix 1 - Chief Internal Auditor's Annual Report - Year ended 31 March 2021.

#### **Report Author**

**Gary Clifford** 

Chief Internal Auditor



# **Thurrock Council**

# Chief Internal Auditor's Annual Report Year ended 31<sup>st</sup> March 2021

Presented at the Standards & Audit Committee meeting of 8<sup>th</sup> July 2021

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#### 1. Introduction

In accordance with Public Sector Internal Audit Standards, the Chief Internal Auditor is required to provide an annual opinion, based upon and limited to the work performed, on the overall adequacy and effectiveness of the organisation's risk management, control and governance processes.

This is achieved through a risk-based plan of work, agreed with management and approved by the Standards & Audit Committee, which should provide a reasonable level of assurance, subject to the inherent limitations described below.

The opinion does not imply that internal audit has reviewed all risks and assurances relating to the organisation. The opinion is substantially derived from the conduct of risk-based plans generated from a robust and organisation-led assurance framework. As such, the assurance framework is one component that the council takes into account in making its annual governance statement (AGS).

In giving our opinion it should be noted that assurance can never be absolute. The most that the internal audit service can provide is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes.

The AGS is an annual statement by the Corporate Director of Resources and Place Delivery (Section 151 Officer and formerly Corporate Director of Finance, Governance & Property), on behalf of the council, setting out:

- How the individual responsibilities of the Section 151 Officer are discharged with regard to maintaining a sound system of internal control that supports the achievement of policies, aims and objectives;
- The purpose of the system of internal control as evidenced by a description of the risk management and review processes, including the assurance framework process; and
- The conduct and results of the review of the effectiveness of the system of internal control including any disclosures of significant control failures together with assurances that actions are, or will be taken where appropriate, to address issues arising.

# 2. Internal Audit Overall Opinion

The purpose of the annual Chief Internal Auditor's Opinion is to contribute to the assurances available to the Section 151 Officer and the council through the Standards & Audit Committee. This opinion will in turn assist the council in the preparation of its annual governance statement.

During 2020/21, there have been a number of challenges that have impacted on the work undertaken during the year. The council, together with the rest of the country, went into lockdown in late March 2020 which resulted in staff being told to work from home wherever possible. In addition, one of the team worked full time with Thurrock Coronavirus Community Action from April to July 2020 to help provide assistance to vulnerable and shielding adults. We also had a Senior Internal Auditor take retirement in June 2020. This clearly impacted on the services' resources.

There were also other challenges as services reassigned and committed staff to working directly on helping to address issues arising out of the pandemic which meant finalising reports was not as easy as it would usually be.

Advice and guidance was provided around changes in controls resulting directly from the pandemic including the increased use of electronic signatures, additional grant work to verify expenditure was in line with the terms and conditions of the grant and other ad hoc work as requested.

However, from our knowledge of the systems in place and the risks the council faces, we are satisfied that sufficient internal audit work has been undertaken during 2020/21 to allow us to draw a reasonable conclusion on the adequacy and effectiveness of Thurrock Council's arrangements.

For the 12 months ended 31 March 2021, based on the work we have undertaken, our opinion below details the adequacy and effectiveness of the organisation's governance, risk management and internal control arrangements.

#### Governance

During 2020/21, as there were no elections we conducted a desktop review of the Register of Gifts, Interests and Hospitality for senior officers and members and all were up to date. Following on from last years' opinion, where we identified some governance issues around major projects, the council brought in a specialist consultancy firm to review one of these contracts. This work was carried out during March/April 2020 and recommendations made to improve oversight and governance of the contract. In addition, and at their request, the Standards & Audit Committee have been regularly updated on the performance and financial issues around the major projects. In 2020/21, the council reviewed its project management methodology and piloted a new project management process. This work is on-going but was reviewed by Internal Audit as part of its planned work during 2020 and recommendations made which were accepted by management. We have also looked at the governance arrangements in specific areas of the council's operations and where we have identified issues, the council has reacted swiftly to address them. As the project management and major contract work is on-going, our overall opinion on governance for 2020/21 remains the same as the previous year which is Amber.



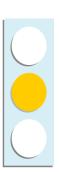
#### **Risk Management**

We undertook a review of risk management during 2017/18, which was reported to the Standards & Audit Committee on 6th March 2018. Based upon the work undertaken, our assessment of the council's current position on the risk maturity spectrum remains Risk Managed. This continues to be in line with the self-assessment undertaken and reported to 11th March 2021 Standards & Audit Committee by the council's Insurance & Risk Manager using the CIPFA/SOLACE Risk Management Benchmarking Model. Whilst the corporate risk management framework and processes are robust, the council still needs to do more at the operational/service planning level to move to the final stage on the spectrum which is that of a Risk Enabled organisation. However, as stated by the Insurance & Risk Manager at that meeting, the capacity and resources available mean that the current rating is very good. Therefore, our overall opinion on risk management remains the same as 2019/20 which is Green. A review of risk management will be scheduled into the 2021/22 audit plan.



#### **Internal Control**

During 2020/21, we issued 11 assurance reports, all of which received positive assurance opinions. We also issued 4 advisory reports on Project Management, Business User Allowance and the work around the BSI ISO 9001 Standards within Environment on Fleet and Country Parks. In addition, we undertook work to confirm spend around 3 COVID specific grants and 2 non COVID related grants (Trading Standards and Bus Subsidies). Whilst advisory reports do not provide a specific assurance opinion, they do contain recommendations and provide assurance around operations. Ad hoc work was also carried out to investigate complaints relating to concerns raised by management at a sheltered housing complex, a complaint around the awarding of a contract following a procurement exercise and checks of claims made as part of the Troubled Families Programme. The work is continuing around the major contracts and projects so our overall opinion for 2020/21 remains the same as 2019/20 which is Amber.



# 3. Acceptance of Internal Audit Recommendations

All of the recommendations made during the year and included within the agreed action plans were accepted by management. Where recommendations were not accepted due to compensating controls, cost etc., these were captured in the findings and recommendations section of the individual report.

# 4. Implementation of Internal Audit Recommendations

Our follow up of the recommendations from previous years and current audit assignments where the implementation date has been reached indicate that the Council has continued to make **Good** progress in implementing the agreed actions.

Any high or medium recommendations not actioned were outstanding as they related to reviews where the implementation date had not yet been reached. These will be followed up as part of next year's review process.

#### 5. Internal Audit Performance

#### **Delivery of value-added services**

During 2020/21, the Internal Audit team provided significant resources and knowledge in assisting with a number of pieces of ad hoc work requested by senior management. Some of these are listed below. In addition, one member of the team is undertaking an apprenticeship with the Institute of Internal Auditors. We are also in the process of changing to a new version of the electronic working papers and implementing data analytics software which should result in a more effective and efficient service in the medium term.

The Chief Internal Auditor has undertaken 2 internal investigations during the year. The first was as a result of senior management contacting the service to request we look at the practices and procedures at a sheltered housing complex following concerns raised

about a potential breach of the COVID regulations following an unauthorised party held by a resident. An internal report was issued and recommendations have been actioned. The second related to a complaint around the awarding of a contract. This is now being dealt with through the Procurement Team and Legal Services.

The Chief Internal Auditor has liaised with the consultant brought in to review a major project.

The service continued to provide advice and guidance to management around their control environments, particularly in respect of changes requested by the Social Services Customer Finance team to introduce electronic sign off of assessments by Social Workers and reduce the need for face to face meetings due to the COVID-19 pandemic.

Internal Audit continue to undertake a series of audits for Environmental Health to enable them to retain their British Standards Institution (BSI) ISO 9001 accreditation. The reviews involve testing the policies, procedures, processes, risk management and quality management arrangements in each of the service areas. Initially, whilst the staff were familiarising themselves with these services, the process was resource intensive but this has reduced as they gain more knowledge and skills. A report is produced for each area after it has been reviewed and recommendations made to address any issues. These reports are provided to the Inspectors as part of the inspection process to give them additional assurance.

There has been an increase in the number of grants being received where the grant provider required internal audit to formally sign off and confirm the grant was spent in accordance with the grant conditions. This area has increased significantly during 2020/21 due to the assistance that central government has provided to local authorities to address the financial impact on the council, residents and local businesses. In 2020/21, the Chief Internal Auditor had to sign off 5 grant funded returns. 3 related to COVID specific funding which covered Compliance & Enforcement, Travel Demand Management and Culture Recovery Fund and 2 non-COVID related grants for Trading Standards and Bus Subsidies. In all cases, the full grant was received and spent in accordance with the terms and conditions. This work is expected to increase during 2020/21 as more grants need to be signed off after they have been received and spent.

We also continue to invest resources in reviewing samples of claims being submitted under the Troubled Families Programme to ensure that outcomes were being achieved as stated, there was evidence to support the outcomes and the claims were accurate. This helps to ensure the council receives its Payment By Results (PBR) grant which results in significant income to the council to help more families and these have been increasing year on year.

#### **Conflicts of Interest**

Internal Audit staff have not undertaken any work or activity during 2020/21 that would require them to declare any conflicts of interest.

#### **Compliance with Internal Audit Standards**

Under the Public Sector Internal Audit Standards (PSIAS), the Internal Audit Service is required to have an external assessment every five years. Whilst the current service is designed to conform to the PSIAS, it has been agreed that a restructure of the service, to meet increasing demands and priorities, needs to be undertaken in 2021/22. Following dialogue with an external assessor, we will be looking to carry out a self-assessment of our compliance after the new structure has been put in place and new staff appointed. As a result, we will be looking to undertake an internal assessment and develop a Quality Assurance Improvement Programme during late 2020/21 and early 2021/22 and have an external assessment later in 2021/22.

#### **Performance Indicators**

Indicator	Target	Actual	Comments
Audits commenced in line with original timescales	Yes	No	Due to the impact of the pandemic and reprioritising of work, some reviews had to be deferred.
Draft reports issued within 10 days of debrief	80%	60%	Some slippage due to competing priorities.
Management responses received within 10 days of draft report	80%	60%	Regular chasing took place. Impact of pandemic resulted in slippage during the year. Escalation as detailed in the Audit Protocol to be more vigorously applied in 2021/22.

Indicator	Target	Actual	Comments
Final report issued within 5 days of management response	90%	90%	Where responses received, final reports were issued within 5 days.
% of high and medium recommendations followed up	95%	90%	Some slippage due to competing priorities.
% of staff with professional qualification or studying towards	>25%	50%	1 qualified and 1 studying through the apprenticeship scheme.
Turnover of staff	<10%	20%	1 member of the team left during this 12 month period.
Response time for general enquiries (2 working days)	100%	100%	Very few received.
Response time for emergencies or potential fraud (1 working day)	100%	100%	Very few received. Fraud team have a dedicated line for potential fraud reporting.

# 6. Internal Audit Opinion and Recommendations 2020/21

		Out the same	Recommendations		
Assignment Objective	Client Lead	Opinion	н	M	L
<b>Arboriculture</b> - New asset management system being implemented and management requested a review to determine that it is operating as expected and benefits are being realised.	Director of Environment, Highways & Counter Fraud	AMBER AMBER RED CREEN	0	0	1
<b>BSI ISO 9001 Country Parks</b> - To undertake a series of quality audits to confirm compliance with the BSI 9001:2015 standard.	Director of Environment, Highways & Counter Fraud	Advisory	0	0	4
<b>BSI ISO 9001 Fleet</b> - To undertake a series of quality audits to confirm compliance with the BSI 9001:2015 standard.	Director of Environment, Highways & Counter Fraud	Advisory	0	0	1
<b>Business User Allowance</b> – To ensure Business User Allowance is claimed and paid in accordance with the Authority current rules and regulations.	Director of HR, OD & Transformation	Advisory	1	1	0
Complaints Management Process – To provide assurance that complaints are dealt with in accordance with prescribed timeframes and processes to ensure the number being appealed and dealt with by the Ombudsman are not escalating.	Strategic Lead – Information Management	AMBER AMBER MED GREEN	0	1	0
Council Tax – To review that properties are recorded on the Council Tax Database completely and accurately and ensure that all income is collected and receipted for in a timely manner.	Corporate Director of Finance, Governance & Property	AMBER AMBER MED GREEN	0	0	0
Disclosure and Barring Service (DBS) checks - To ensure DBS checks are undertaken and information is handled in line with the DBS Code of Practice.	Director of HR, OD & Transformation	AMBER AMBER  MED GREEN	0	2	5
<b>Fostering</b> - To review that there are appropriate controls around the assessment, appointment and payment of Foster Carers.	Assistant Director of Children's Services	AMBER AMBER  RED GREEN	0	3	2

		Outuion	Recommendations		
Assignment Objective	Client Lead	Opinion	н	M	L
Houses in Multiple Occupation (HMO) To review the arrangements in place within the Council that ensure processes and procedures over mandatory licencing and additional licensing of HMOs are in compliance with regulation, and income from licensing and enforcement operations is ringfenced for the operation of the scheme.	Assistant Director – Housing Management	AMBER AMBER  GREEN	0	2	1
<b>Leaseholder Charges</b> – A review to determine that service charges to leaseholders are raised fairly, accurately and in line with guidance.	Assistant Director – Housing Management	AMBER AMBER  GREEN	0	1	1
No Recourse to Public Funds (NRPF) — Review of the process for assessing entitlement and allocating funds to persons who appear to be in need but have no access to the benefits system.	Corporate Director of Children's Services	AMBER AMBER  GREEN  GREEN	0	3	2
<b>Project Management</b> - To determine whether the project management control framework being developed for implementation in the Place Directorate is sufficiently robust to ensure effectiveness and consistency in the delivery of projects.	Director of Place	Advisory	1	1	3
Public Contracts Regulations - An audit of the council's contract awards process to provide assurance that it complies with public contracts regulation 2015.	Corporate Director of Finance, Governance & Property	AMBER AMBER  GREEN	0	2	4
Housing Rents - To undertake a review of Housing Rents to verify that an adequate level of controls exist over the setting, collection and accounting for Housing Rents.	Corporate Director of Adults, Housing & Health	AMBER AMBER  GREEN	1	0	1
Water Charges - To undertake a review of water charges to ensure the council is being consistent in how it applies the charges to residents who pay for their water together with their rent.	Corporate Director of Adults, Housing & Health	AMBER AMBER  SED GREEN	0	1	0

#### Standards & Audit Committee Work Programme 2021/22

Dates of Meetings: 8 July 2021, 9 September 2021, 25 November 2021 and 10 March 2022

Торіс	Lead Officer			
8 July 2021				
Regulation of Investigatory Powers Act (RIPA) 2000 - 2020/21 Activity Report	Lee Henley			
Chief Internal Auditor's Annual Report – Year ended 31 March 2021	Gary Clifford			
Counter Fraud & Investigation Annual Report & Strategy	David Kleinberg			
Annual Information Governance Report	Lee Henley			
Red Reports (as required)				
9 September 2021				
Annual Complaints & Enquiries Report 2020/21	Lee Henley			
Counter Fraud & Investigation Performance Report Q1	David Kleinberg			
Internal Audit Charter 2021	Gary Clifford			

Andy Owen  Sean Clark  Sean Clark / Colin Black				
Sean Clark / Colin Black				
Sean Clark / Colin Black				
Lee Henley				
Gary Clifford				
David Kleinberg				
BDO / Sean Clark / Jonathan Wilson				
BDO / Sean Clark / Jonathan Wilson				
10 March 2022				
Lisa Clampin (BDO)/Jonathan Wilson				
Lee Henley				

Annual Review of Risk and Opportunity Management and the Policy, Strategy and Framework	Andy Owen
In Quarter 4 Review of the Strategic/Corporate Risk & Opportunity Register	Andy Owen
Internal Audit Progress Report 2021/22	Gary Clifford
Counter Fraud & Investigation Performance Report Q3	David Kleinberg
Thurrock Annual Audit Letter 2020/21	BDO / Sean Clark
3 Year Strategy 2021/22 to 2023/24 and Annual Plan 2022/23	Gary Clifford
Red Reports (as required)	

Clerk: Jenny Shade Last Updated: May 2021

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