Appendix 1a Summary of progress on audit report recommendations

Note: Where cells in the following tables are greyed out this signifies that there has been no revision to the original implementation dates for these recommendations.

Delegated Decision Recording

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
1	Full details of the decision making process, and supporting information, should be held for all decisions taken. There should be a clear record in all reports outlining the rationale for adopting the chosen course of action.	High	November 2025		We have reviewed the number of decision recording templates (5 currently in place) with a view to reducing these to streamline and to support compliance. A new delegated report template has been designed, which includes strengthened guidance for officers. Meetings have taken place with the Monitoring Officer, Assistant Director of Governance and Interim Head of Democratic Services. Amendments and clarity is required in the Council's Constitution and this work will be taken through the cross-party member constitutional working group for consideration. The draft report template will be tested through an internal working group for feedback, before wider roll-out.
2	Training Training sessions should be undertaken regularly, particularly for report authors whose previous roles may not have included experience of drafting delegated decision reports.	High	November 2025		Detailed training guides are available for officers, and the Assistant Director of Governance has discussed with Organisational Development how we can align this to the induction for new starters.

Delegated Decision Recording

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025		
	This will reduce the risk of errors in the report and ensure that all relevant information is included, and the appropriate comments obtained.				A draft training programme has been developed by Democratic Services. This will be shared with the internal working group referred to above for feedback, prior to wider roll-out. It is proposed to utilise networks including the Extended Leadership Team to disseminate training. The Council's new intranet site will also be updated with guidance and templates. Training will also be offered to elected members to ensure they an login to the modern.gov system and know how to use this to look for decisions.		
3	Review Constitutional Services should conduct a manual review of all information that is uploaded to modern.gov, in order to reduce the risk of officers uploading commercially sensitive information that could be deemed as "exempt" as per the Constitution.	High	Ongoing	Complete	The Interim Head of Democratic Services now reviews reports uploaded by officers onto Modern.Gov for quality assurance purposes. Where issues have been identified, for example, making a report exempt which should be public and vice versa, the relevant officer has been contacted and advice has been given to mitigate similar issues going forward. The Head of Democratic Services is also delivering training across the team to build capacity to quality assure reports. It is proposed to maintain a list of frequent matters/issues, which will feed into the training so that learning can be shared – and a list of		

Delegated Decision Recording

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
					FAQs added to our intranet site so that learning can be shared.
4	Delegated Reports Each decision uploaded onto modern.gov should be accompanied with the relevant final delegated decision report. This provides evidence that the decision is appropriately justified and that the relevant comments have been received.	High	Ongoing	Complete	This is part of the quality assurance role in Democratic Services. It will also be a key part of the roll-out of the training.
5	Confirmation of Final Comments The service should fully utilise the modern.gov system in order to establish a robust audit trail and version control to ensure that all comments received are those of the original author and the responsible officer.	High	November 2025		There are interdependencies with recommendation 1 above in terms of the roll-out of a new report template. Through the working group it is proposed to agree the internal comments process, so that modern.gov can build it to our specification, for example, the order in which the report goes to officers for comments. An initial meeting has taken place with Modern.Gov to look at how we can fully move decision making online to strengthen version control and the audit trail of reports. This will also ensure that teams such as legal and finance have to input their comments as the responsible teams.

Cont	Contracts Register Review								
No.	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
1	A Contract Management Policy A Contract Management Policy and associated standards and guidance toolkit should be developed to ensure that all contracts are managed in a consistent and compliant manner. This should be available to all contract managers.	High	30 April 2024	March 2026	Contract Management Policy and procedures being drafted with the aim of consulting Management Board in December 2025. Rollout and training programme to be in place by the end of March 2026.				
2	ProContract- Delegated Decisions and Approvals It is recommended that a review of the ProContract monitoring facility is conducted to ensure that each contract that requires a delegated decision or approval has the necessary report added to the attachments.	High	30 April 2024	Complete	Complete The original 'Pre-Procurement Approval Form (PPAF)' has been replaced by the 'non-complex procurement sourcing strategy' document for procurements >£30k.				
3	Contract Management Training The Procurement Team, in conjunction with Organisational Development should source, either via eLearning or in-house, comprehensive training courses developed for all contract managers to provide assurance of competence in contract management roles.	Medium	30 April 2024	March 2026	See Recommendation 1				

Appendix 1a Summary of progress on audit report recommendations

Resource Planning

Contracts Register Review Original Progress update October 2025 Recommendation **Priority** Revised No. **Implementation Implementation** Date Date Partially complete (PA23 requires KPis for all Measuring Performance Medium 30 April 2024 4 March 2026 contracts in scope, proposal to extend to It is recommended that the Procurement Team contracts between £100k and £5m). review the utility of ProContract with a view to implementing robust contract management Alternative contract management software options are being explored. processes. These processes will enable the team to consistently measure performance and value for money in line with the Council's objectives and savings targets. Customer Feedback Medium 30 April 2024 March 2026 This will be picked up as part of Recommendation 1. Customer Feedback from suppliers, key stakeholders and colleagues should be recorded in order to help assess the financial and operational performance of contracts. Contracts missing from the Register High 30 April 2024 March 2026 A data matching exercise will be conducted for those contracts not already on the published A data matching exercise should be conducted pipeline for procurement. between the contracts register and data held by legal and directorates to ensure that all contracts We will work with the Accounts Payable Team to are recorded on the register. review the Authority's creditors and identify

30 April 2024

Complete

Medium

contractual and non-contractual spend.

Complete

Appendix 1a Summary of progress on audit report recommendations

Cont	Contracts Register Review								
No.	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
	The Procurement Team should place less reliance on a master spreadsheet during the resource planning process and explore other, more robust, means of recording workflows, e.g., Pipeline.								
8	Contract Register Values The contracts register should be reviewed to ensure all data and relevant fields have been populated including contract value.	Medium	30 April 2024	March 2026	See recommendation 6				
9	Data Management – Sharepoint Arrangements for the retention and storage of procurement documentation on SharePoint should be reviewed to ensure a standardised approach is adopted.	Medium	30 April 2024	March 2026	Sharepoint site established, four procurement categories opened:				

Rec	Recruitment and Discipline								
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
1	The Payroll and HR Service should consult with the Head of Education Support Services and HR colleagues to agree a procedure for the collection and storage of a central record of statutory preemployment checks, including DBS checks. (The recommendation has been duplicated in the 2024/25 Fundamental Financial Systems – Payroll Review)	High	June 2025	March 2026	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. Currently, LAE schools retain pre-employment checks locally, and records are not kept in the OMBC HR team records. Since August 2025 a high-level options appraisal has been undertaken to understand options, including a regular audit cycle ran through the schools HR Advisory team. A meeting to discuss a way forward is being planned for October 2025 with the Heads of Education Support Services.				
2	Strengthen the employee vetting process by ensuring that incomplete or ambiguous reference checks, such as "no comment" responses, are thoroughly reviewed and escalated for further investigation before proceeding with hiring decisions.	High	February 2025	Complete	This was discussed and addressed at the time of the audit. However, a wider conversation has taken place in September 2025 about ensuring the competence of recruiting managers, as accountability for approving references sits with managers not Employment Services. There is a Recruitment & Selection e-learning module which is optional for recruiting managers				

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					currently. A scoping piece of work is underway to understand take up of this and the feasibility of this becoming mandatory.
3	Implement stricter protocols for reviewing DBS checks to ensure that all relevant information, including any criminal history, is made available to the recruiting Manager during the recruitment process. A formalised checklist should be created for vetting purposes with evidence provided to the recruiter prior to recruitment interviews.	High	March 2025	November 2025	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. The current application form means that this information is not available at interview stage. It is not usual procedure to do this. It has been agreed that an additional "Declaration form" will be included at onboarding stage where individuals will be asked to declare convictions, warnings, bindovers, investigations and fitness to practice. This will be shared with
4	Create a dedicated mandatory training program to equip disciplinary chairpersons with the knowledge and skills required for their role.	High	March 2025	January 2026	recruiting managers at onboarding stage. DBS's are processed through CBS and if concerns are raised these are shared with the recruiting manager. This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. This work has now commenced, with stakeholders working to agree content for a disciplinary chairperson e- learning package. This is aimed for completion by January 2026.

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5	Explore the implementation of a dedicated case management system to streamline case reviews, improve record-keeping, and facilitate the setting of case reminders. This system should support accurate classification and enhance oversight of disciplinary processes.	High	October 2025	October 2026	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. A programme of work to optimize the iTrent system has been approved in principle. This includes – among other things – scoping the implementation of the case management module. This is in the long-term actions and therefore will not be actioned until at least October 2026. In the interim the HR Advisory team will imminently implement a new and more robust Employee Relations Excel tracker. This clearly breaks down cases, timelines and actions in a more meaningful way. This will be a standing agenda item on weekly Team meetings and 121s.
6	The service should clearly define and consistently apply the criteria for Gross Misconduct to ensure consistent expectations and outcomes in disciplinary proceedings emphasising that dismissal should be the default outcome when Gross Misconduct is proven.	High	March 2025 Revised to September 2025	Complete	The HR Advisory team has strengthened it's quality & assurance process around case management, which includes review of misconduct and gross misconduct cases. This includes: - Weekly case meeting - Bi weekly 121s and case reviews - Acting HR Manager (team lead) quality checking all panel packs prior to hearing dates and outcome letters Learning sessions and case reviews happen regularly.

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					It is anticipated this will strengthen quality and focus of case work.
7	Develop and implement comprehensive sentencing guidelines that outline acceptable mitigating factors and appropriate sanctions to ensure consistency in disciplinary outcomes. Strengthen management oversight of HR's advice on mitigating factors to promote fairness and accountability in decision-making processes.	High	March 2025 Revised to September 2025	Complete	The HR Advisory team has strengthened it's quality & assurance process around case management, which includes review of potential sanctions This includes: • Weekly case meeting • Bi weekly 121s and case reviews • Acting HR Manager (team lead) quality checking all panel packs prior to hearing dates and outcome letters Learning sessions and case reviews happen regularly. It is anticipated this will strengthen quality and focus of case work
8	The service should conduct a thorough review of the cases dropped due to insufficient evidence to confirm their proper outcome and classification. Establish clear guidelines to ensure that cases are accurately categorised, particularly when evidence is lacking.	High	March 2025	N/A	It has been agreed that we will not review historic cases given the time elapsed since this Audit is done. The HR Advisory team has strengthened it's quality & assurance process around case management, which includes review of potential sanctions This includes: • Weekly case meeting • Bi weekly 121s and case reviews • Acting HR Manager (team lead) quality checking all panel packs prior to hearing dates and outcome letters

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					Learning sessions and case reviews happen regularly. It is anticipated this will strengthen quality and focus of case work
9	The Council should review its current member-led appeals process to assess its effectiveness and alignment with best practices. Explore the feasibility of adopting a senior officer-led appeals process, where a new, impartial senior officer acts as the Disciplinary Chair to hear appeals. This approach would align with the practices of neighbouring authorities and enhance impartiality and consistency.	Medium	June 2025	December 2025	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. Discussions will commence imminently with relevant stakeholders regarding the possibility of adopting a senior officer-led appeal process. However, as this will take time, a guidance document highlighting the role of an appeal against dismissal panel and the role of Elected Members is currently being drafted with the intention to launch in December 2025.
10	The Council should reinforce compliance with its Disciplinary Policy and Procedure by ensuring that all cases involving Fraud/Theft are promptly referred to Internal Audit and Counter Fraud for advice and assistance.	Medium	January 2025 Revised to September 2025	Complete	Complete. An extra column has been included in the Employee Relations tracker to ensure fraud/theft cases are picked up specifically for referral to IA and Counter Fraud.
11	Establish an annual review process for the Codes of Conduct and Disciplinary Policy and the Recruitment and Selection Policy to ensure they remain up to date with legislative changes and organisational requirements.	Medium	Ongoing Revised to September 2025	Complete	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing.

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However from September 2025 the Head of HR and HR Manager are working on a programme of Policy updates, starting with Grievance and Dignity at Work. This will cover Code of Conduct

and R&S.

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Appendix 1a Summary of progress on audit report recommendations

No	Recommendation	Priority	Original	Revised	Progress update October 2025
			Implementation Date	Implementation Date	
1	Submission of KPIs should be alongside supporting Data, or on a formal template providing assurance that data is accurate and complete, and confirming that the figures provided and reported to Scrutiny Boards are reliable. Services should retain a record of the information and sources utilised in compiling their KPIs. A statement should be included within the submission form for the service manager to confirm that data is true and accurate.	High	As of Q1 reporting of 2025/26 cycle	Complete	Action completed as of Q1 reporting of 2025/26 cycle and will be repeated thereafter. A Management Accountability Framework (or similar) for performance reporting will be clarified as part of the business planning / Performance Management Framework review & refresh (by Sept 2025); this will be in line with the emerging Local government Outcomes Framework (LGOF) The PI Team will continue to support relevant teams / services in the development of the Council's Digital Strategy and projects such as the DSP; Migration to SharePoint; Azure Al integration. This work is ongoing – a draft Performance Management Framework was presented in August 2025
2	Business Plans A policy should be drafted to implement a formal monitoring process to ensure all services submit	High	Late 2025.		This work is ongoing – a draft Performance Management Framework was presented in August 2025. The new approach will strengthen performance management and improve

Appendix 1a Summary of progress on audit report recommendations

Corporate Performance Management

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
	their business plans in line with established guidance and timelines. Non-compliance should be addressed through specific measures to support consistent performance management.				alignment of business plans with corporate priorities.
3	KPI Reporting A clear process of selecting which KPIs are reported to the Overview and Scrutiny Board should be drafted, ensuring that the narrative for KPIs is consistent and provides a clear picture of service performance that aligns with the Corporate Plan.	High	September 2025		This work is ongoing – a draft Performance Management Framework was presented in August 2025. Initial discussions have taken place with service leads to identify priority measures, and work is underway to strengthen the quality of performance commentary to provide a clearer picture of service delivery.
4	Performance Reporting System A CorVu replacement should be sought out and implemented as soon as possible, to ensure that oversight of the Council's performance management function is robust and meets organisational needs.	High	September 2025		This work is ongoing – a draft Performance Management Framework was presented in August 2025.
5	Performance Reporting Policy	High	September 2025		This work is ongoing – a draft Performance Management Framework was presented in August 2025. This new framework will be

Appendix 1a Summary of progress on audit report recommendations

Corporate Performance Management

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
	A policy should be drafted and communicated to managers in order to support services submitting KPIs in their service area.				adopted before the next Business Planning cycle for 2026/27.
6	Completeness of KPI Records All KPI data should be collated and reported ensuring that they are reported to scrutiny board. Unreported KPIs by the service should be escalated to senior management.	High	September 2025		This work is ongoing – a draft Performance Management Framework was presented in August 2025. As part of the Performance Management Framework, arrangements are being put in place to escalate unreported KPIs to senior management to strengthen accountability and ensure comprehensive performance oversight.

Debt Recovery 2024/25 FFS Review Progress update October 2025 Original Revised Recommendation No **Priority Implementation** Implementation Date Date Brought forward Complete Proposed ASC Debt Recovery Process High Complete. from 2023/24. The action plan to address outstanding debt The Adult Social Care Debt policy continues to presented to DMT in July 2021 should be provide guidance and support to officers in decision-making, helping to endure consistency progressed. and transparency. Following the end of the Brought forward from previous years. Income and Prevention Officer post in December 2024, casework has been absorbed into the wider service. The 2025/26 review of Revenues and Benefits including the Accounts Receivable, and Client Finance teams are now underway. This review will assess current processes, resourcing and governance arrangements. This work has commenced already. Regular debt panel meetings are in progress where cases are reviewed and decisions regarding recovery action are being taken.

			Original	Revised	Progress update October 2025
No	Recommendation	Priority	Implementation Date	Implementation Date	1.15g. 555 apadio 65t655. 2526
2	Bad Debts: The spreadsheet maintained for Debt Panel Debts should be updated and maintained by Legal Services when cases are passed through to them, including: • the date a Court hearing date was received, • the date of the hearing, and • the subsequent action from the hearing should all be updated.	Medium	Brought forward from 2023/24	December 2025	Legal have created a central debt recovery spreadsheet that includes all cases sent from debt panel. This is being updated by the legal assistant in legal.
3	Orders for Sale: A process should be implemented to ensure there is continuous monitoring and progression of Charging Orders to Orders for Sale where this is appropriate.	Medium	Brought forward from 2023/24	Complete	The Process has been implemented and embedded within business-as-usual debt panel reviews. Monthly Debt Panel Meetings are scheduled in line with the requirements of the Councils Charging Order and Insolvency Policy. Monthly reviews are also in place to monitor ongoing cases with solicitors acting on the Councils behalf. No new Order for Sale cases has been enforced since April 2025, but a number of cases with secured arrears are under review. These instances include where owner occupiers are asset rich but cash poor, and others where owners have tenanted their properties. Careful consideration is being given to avoid action that could lead to making residents homeless.

Appendix 1a Summary of progress on audit report recommendations

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
					The review of potential charging orders and Order for Sales are now treated as business as usual. Learning from the three initial order for sale cases have highlighted that disposal is a costly and length process, with additional risks such as disputed ownership, undisclosed occupation, and property disrepair. While costs have been recovered, this experience is being used to refine case selection. It is anticipated that legal action on occupied properties would be significantly more costly, and the Council would seek to enforce a payment arrangement in the first instance there is the courts would be required to enforce an order for sale increasing the risk of homelessness for any potential debtors.

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N	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
4	Attachment of Earnings / Benefits: All existing Attachment of Earnings / Benefits should be monitored on an ongoing basis. In addition to pursuing those debtors where the relevant attachments are not being applied, those with existing debts should be reviewed to ensure they don't fall into further arrears.	Medium	Brought forward from 2023/24	Complete	The Process has been implemented and embedded within business-as-usual processes This area continues to be managed as business as usual, with reports generated from the Council Tax administration system and reviewed by the debt recovery team. National issues remain with attachment of benefits, including significant delays with the DWP and cases where insufficient benefit remains following other deductions already in place to allow any further deductions. There remain instances where employers are slow to commence deductions from attachment to earnings. Where delays or barriers arise, cases are escalated quickly to alternative recovery methods. It is also recognised that deductions rarely clear Council Tax arrears within the financial year, which means debt often increases when a new year bill isn't paid. Council policy prevents the use of enforcement agents in Council Tax Reduction cases, which restricts the range of recovery options available.

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	Debt Recovery 2024/25 FFS Review							
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025			
5	Bad Debt Follow-Up and Enforcement: All bad debts should be routinely monitored and actioned promptly when arrangements are not maintained.	Medium			Full implementation will take time to complete due to the scale of historic debt and limited review capacity. Current focus is on prioritising debts that remain recoverable and progressing these through appropriate enforcement. Automations within the administration system continue to help identify cases where payments have stagnated or defaulted moving them onto the next stage of recovery. Monthly records are maintained to track arrears, costs and fees, amounts collected, and amounts written off. For older debts, work is being scoped under the Ready for the future programme to carry out a comprehensive review. This will include a refresh of the write of procedure to endure clarity and transparent, moving away from the historic approach still in place from when the service was contracted out. Progress is constrained by limited resource to review significant arrears, particularly as much of the debt is not coded on the system for write off. This makes the identification of irrecoverable debts resource-intensive, requiring assurance before authority to write off can be requested,			

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No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
6	Debts in Legal: All debts currently with Legal Services should be reviewed on a continuous basis to ensure follow-up on each debt is progressing in line with debt recovery policy.	Medium	Brought forward from 2023/24	December 2025	The legal service have one member of staff (legal assistant) who is responsible for progressing charging order applications for council tax as well as issuing all sundry debts and managing the process and progressing all debt recovery for any other service. The member of staff is continuing with business as normal but has created a spread sheet of all new debts sent to legal and is working on adding historical debts which unfortunately requires manual data entry.
7	Debts in Legal: A spreadsheet should be maintained detailing progress on pursuing debts through legal action.	Medium	Brought forward from 2023/24	December 2025	All new debts are added to a spreadsheet and this is updated and being added to on a regular basis. This is now in effect. Due to the high level of debt that is escalating, just having a spreadsheet will not be sufficient to tackle the level of debt. It is advised that senior officers from Council tax, business rates and adult social care client finance and commissioning form a working group to establish how the debt levels can start reducing. If it is necessary for legal services to hire another debt recovery legal assistant to take the lead on tackling the backlog this can be arranged and would be a spend to save appointment.

Appendix 1a Summary of progress on audit report recommendations

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
8	Debts in Legal: Debts in Legal that are inclusive of VAT should be reviewed prior to the ability to claim VAT expiring, and, where applicable, written off.	Medium	Brought forward from 2023/24	December 2025	The spreadsheet has various dates on and legal can assist and liaise with finance about VAT dates but finance can also be provided with a copy of the spreadsheet.

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress October 2025
1	Payroll Reconciliations Monthly Payroll Reconciliations should be carried out in a timely manner. The review noted that there were delays in performing the reconciliations. The working group established should continue to take steps to address the issues identified in connection with the payroll to General Ledger reconciliation process. Brought forward from 2023/24	High	Brought forward from 2023/24 Revised to June 2025	September 2025	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. From September 2025 a monthly Payroll Reconciliation working group has been set up, currently led by the AD of Workforce & Organisational Culture, although will ultimately be led by Head of Operational HR. The first meeting was able to identify the elements causing imbalance between Payroll and ledger, with actions for the Payroll Manager to address with GMPF. In addition, the organisation approved a programme of work with MHR to undertake various iTrent optimisation actions. This will create capacity for the Payroll team and allow for greater focus on this area. It is anticipated this programme will start from November.

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2	Pre-employment and Right to Work Checklist- Schools	High	Brought forward from 2023/24	March 2026	This action is included in the Payroll report also, however this is a wider HR issue and is not specifically a Payroll issue.
	The Payroll Service should liaise with the Head of Education Support Services and HR colleagues to agree a procedure for the collection and storage of a central record of statutory pre-employment and DBS checks.		Revised to June 2025		This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing.
	The review has noted that this action has not progressed as expected and steps should be taken around storage of supporting information on preemployment checks.				Currently, LAE schools retain pre-employment checks locally, and records are not kept in the OMBC HR team records.
	Brought forward from 2023/24				Since August 2025 a high-level options appraisal has been undertaken to understand options, including a regular audit cycle ran through the schools HR Advisory team.
					A meeting to discuss a way forward is being planned for October 2025 with the Heads of Education Support Services.
3	Policies and Procedures	High	Brought forward from 2023/24	March 2026	This action had not been completed to the initial implementation date due to capacity constraints
	Management should ensure the following: 1. That the documentation of payroll procedures for		Revised to September 2025		and turnover in senior leadership, however is now progressing.
	the use of staff within the Payroll Team is expedited. Once complete, they should be		Coptomicol 2020		Approval has been given for additional Payroll resource to support the team, which will
	circulated to all relevant staff within the Team and training provided if necessary.				commence imminently. This is for 6 months to create capacity for the Payroll Manager and Payroll seniors to focus on creation of SOPs.
	All policies and procedures including the Pay Policy and Procedures documentation should be				In addition a new HR Employment Services
	regularly updated so that they remain relevant and refer to current systems.				Manager has been appointed and will start in October 2025, who will oversee progress with

	3. Set out formally (in writing) the roles and responsibilities of staff within the Payroll Team. Brought forward from 2023/24				this work in partnership with the Head of Operational HR. In addition, the organisation approved a programme of work with MHR to undertake various iTrent optimisation actions. This will create capacity for the Payroll team. It is anticipated this programme will start from November.
4	CHAPS Payments – Review of all Chaps Requests A full review of CHAPS payment requests should be analysed in order to identify any common system or process issues, which can be addressed and rectified to reduce the number of CHAPS requests. Brought forward from 2023/24	Medium	Brought forward from 2023/24 Revised to May 2025	August 2025	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. However, from August 2025 it has been agreed all CHAPs payments will be approved by Assistant Director of Workforce & Organisational Culture. An initial review of reasons for CHAPs payments suggests that late new starter forms is the primary reason so far. The HR Employment Services Manager will have an action to create metrics based around pay errors and to work with the HR Advisory team where there are trends for managers submitted information late.
5	Starters All supporting documentation should be retained in the central drive, in respect of starter details, including salary details, to ensure they are	Medium	Brought forward from 2023/24 Revised to June 2025	March 2026	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing.

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	processed accurately and to ensure accurate data can be obtained should any future queries arise. The starters forms should be signed and dated by the appropriate line manager. If errors are identified in the supporting recruitment documentation, they should be highlighted to the relevant authorising officer and rectified accordingly. Brought forward from 2023/24				There is a wider piece of work underway to support HR folder compliance. An extra resource has been appointed for 6 months to undertake a whole review of all HR files on the drive, highlighted gaps and risks. Where needed, information to fill gaps will be obtained. The end point will be clear SOPs and training where there are regular patterns of this being missed. The iTrent optimisation work highlighted above will also create capacity in the team allowing for more time to focus on documentation. In the meantime, teams are regularly reminded on the importance of saving approvals.
6	Exceptional Payments Where exceptional payments are authorised by Services, Payroll Services should ensure it is line with policy and calculated correctly. Any decisions made outside the pay policy needs to be authorised by the relevant Service Director through the relevant form and supporting documentation. The documentation should be retained on the employees personnel file for audit and transparency purposes. Brought forward from 2023/24	High	June 2025	Complete	Complete. The HR Team now works in line with Special Severance Payments - GOV.UK in partnership with our Legal Team.

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7	Overpayments -Communications to Managers Communication should be sent to all Managers responsible for staff to reiterate the importance of submitting leavers forms in a timely manner to prevent overpayments Good practice needs to be re-enforced, potentially through a training / awareness campaign and/or targeted communications in cases of non- compliance. Brought forward from 2023/24	Medium	Brought forward from 2023/24 Revised to July 2025	October 2025	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. From August 2025 regular monthly communication on pay affecting deadline dates is shared via Viva Engage and via HR reports through to DMTs. The HR Employment Services Manager will have an action to create metrics based around pay errors and to work with the HR Advisory team where there are trends for managers submitted information late.
8	Salary Overpayment Repayment Plans When an overpayment has been created, Payroll should adhere to the Overpayment Policy wherever possible. This is a new recommendation for 2024/25	Medium	July 2025	January 2026	This action had not been completed to the initial implementation date due to capacity constraints and turnover in senior leadership, however is now progressing. More is needed to ensure that overpayments are reclaimed in an appropriate and robust way. The iTrent optimisation work highlighted above will also create capacity in the team. The HR Employment Services Manager due to start October has this as an objective.

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9	Employees should be issued with employment contracts within a timely manner. In the absence of an employment contract outlining terms and conditions of employment there is a risk that disputes may arise, and claims may be brought against the Authority. Brought forward from 2023/24	High	Brought forward from 2023/24	January 2026	This should be included in the Recruitment & Disciplinary Audit as Payroll are not responsible for contracts of employment. An extra resource has been appointed for 6 months to undertake a whole review of all HR files on the drive, highlighted gaps and risks. Where needed, information to fill gaps will be obtained. In addition, the HR Employment Services Manager will have an objective based on auditing and tracking compliance with this action.
10	External Consultant Managers file — Communication to Recruiting Managers Starters forms for External Consultant Managers should be fully completed by an authorising officer prior to entering the individual in to the i-Trent system. A personnel file should be set up and include (where appropriate) the recorded delegation decision demonstrating the appointment process and employee timesheets, including a copy of a REC1. Managers should be reminded that external consultant staff members will not be processed unless the relevant paperwork is present. Brought forward from 2023/24	High	Brought forward from 2023/24 Revised to January 2025	March 2026	This is partially implemented but there are gaps in the process. All external contractor/agency requests should come through the Corporate Vacancy Panel for approval, but currently this is not the case. An Agency Spend Working Group has been set up from October, whose role will be to create more robust governance around agency workers and off framework workers. Therefore the date of this action has changed as this area will continue to have weakness until approval processes are strengthened.

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11	Leavers Documentation	Low	Brought forward	Complete	Complete
	All supporting documentation should be retained in		from 2023/24		
	respect of leavers details and stored in the				
	appropriate folder.				
	Brought forward from 2023/24				

Chil	Children's Services 2024/25 FFS Review								
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
1	System notes / Process Notes should be formalised for the new Mosaic Finance platform to establish robust financial processes and a strong financial framework. This should be circulated to all staff involved, supported by Finance. Brought forward from 2023/24	High	Brought forward from 2023/24 30 September 2025	Spring 2026	Due to the technical complexity and IT capacity, the changes have taken longer than anticipated to be implemented. Existing Mosaic training guides have been reviewed and are being revised for purchasing and payment processes through the Mosaic Children's Finance project. Revised implementation dates: The purchasing guides will be completed by end of October 2025. The payment process guides will be completed in Spring 2026 following the Mosaic upgrade.				
2	All costs to be recorded on Mosaic Management to consider using the Mosaic system as the first point of entry for all purchase orders, including: • Short Breaks • Out of Borough placements	Medium	Brought forward from 2023/24 30 September 2025	Late 2026.	Due to the technical complexity and IT capacity, the changes have taken longer than anticipated to be implemented. The capability is in place and the costs are recorded on Mosaic for Out of Borough placements and Independent Foster Agencies.				

Appendix 1a Summary of progress on audit report recommendations

Children's Services 2024/25 FFS Review

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025			
	Independent Foster Agencies. Brought forward from 2023/24		Date	Date	Data cleansing activities have been completed for current packages. This completion of the work for short breaks has been delayed due to a mandatory upgrade of the Mosaic system, which must take place by the end of March 2026. Revised implementation dates: Mosaic development for Short Breaks will be completed in October 2025, which will provide the capability for costs to be recorded on Mosaic. Current short breaks packages will be migrated to Mosaic by February 2026. Testing of the Accounts Payable interface between Mosaic and Agresso for direct payments will commence in spring 2026 and the work on payments cycles for these payments will commence later in 2026.			
3	Monthly System Reconciliations	High	Brought forward from 2023/24	Spring / Summer 2026	Standard Mosaic reports are available and can be used to extract financial data from Mosaic for payments i.e. to Foster Carers.			

Appendix 1a Summary of progress on audit report recommendations

Chil	Children's Services 2024/25 FFS Review								
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
	The Service should liaise with Finance colleagues to ensure that Mosaic and Agresso are reconciled on a monthly basis. Brought forward from 2023/24		30 September 2025		Revised implementation date: Finance colleagues will complete monthly reconciliation once payments are processed through Mosaic from Spring/Summer 2026.				
4	Periodic Supplier Payments (PSPs) The Service should consider transferring regular payments currently set up on Agresso for PSPs to the Mosaic system as the first point of entry for all purchase orders. This would capture the Manager's approval as well as the details of the inputting officer as an audit trail. Brought forward from 2023/24	High	Brought forward from 2023/24 30 September 2025	Spring 2026	Due to the technical complexity and IT capacity, the changes have taken longer than anticipated to be implemented. This work has been delayed due to a mandatory upgrade of the Mosaic system, which must take place by the end of March 2026. Revised implementation date: System development for recording direct payments in Mosaic will be completed in October 2025. This will enable purchase orders and manager's approval to be captured within Mosaic. Current direct payment packages will be migrated to Mosaic by February 2026. Testing of the Accounts Payable interface between Mosaic and Agresso for direct payments will commence in spring 2026.				

Appendix 1a Summary of progress on audit report recommendations

Chile	Children's Services 2024/25 FFS Review								
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
5	ICB Funding Funding agreements with the ICB and/or Education is obtained for all individuals whose funding is shared between sponsors. Funding agreement documents should be saved to Mosaic and not stored off-system. Brought forward from 2023/24	Medium	Brought forward from 2023/24	Complete	This action is complete, all funding agreements with the ICB have been uploaded to the child's file on Mosaic and this is now an ongoing business as usual monitoring action.				
6	Short Breaks Plans Short Breaks Plans should be completed in a timely manner to ensure payments are accurately recorded and in line with the statutory duty.	Medium	Brought forward from 2023/24	Complete	This action is complete and is now an ongoing business as usual monitoring action due to a continuous cycle of reviewing new and existing plans.				
	Brought forward from 2023/24				The updated Short Breaks Plan document is now live in Mosaic and includes more comprehensive cost information. Performance is monitored through monthly				
7	Duplicate Records	Medium	Brought forward from 2023/24	Complete	performance mechanisms within the service. This action is complete and is now an ongoing business as usual monitoring action. As contacts come into the MASH duty and advice service,				

Appendix 1a Summary of progress on audit report recommendations

Children's Services 2024/25 FFS Review

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
	Duplicate client records should be removed by moving all the information across to the main records, and then deleting the duplicate records. Staff should check that a record does not already exist for an individual before creating a new one. Brought forward from 2023/24				workers check for existing records on the system on a daily basis. There is a two point check completed by the Customer Support Officer and the Social Worker.
8	Direct Payments A monthly review of all children transitioning to Adults Services should be conducted to ensure that the transition is supported by the appropriate documentation and management oversight. Brought forward from 2023/24	High	Brought forward from 2023/24	Complete	This action is complete and is now an ongoing business as usual monitoring action. The Children's Direct Payments Policy has been approved and is being utilised by the service. Data and intelligence on children transitioning to Adult Social Care is now available and both Children's and Adults are continually reviewing the performance of the transition's workflows.

No	Recommendation	Priority	Original	Revised	Progress update October 2025
			Implementation Date	Implementation	
1.	Workflow The service should continue in the implementation of their recovery plan to address outstanding workflow requirements. Brought forward from 2020/2021	High	Brought forward from 2020/21 September 2025	December 2025	Revised Implementation Date December 2025. The number has been significantly reduced from a position of 1,332 in February to 425 at the start of September. Work is progressing to close the remainder of these with targeted work being completed on historical safeguarding workflows, ensuring that people are safe and free from harm. Reason for slippage Resource pressures across ASC and the recent notification of CQC inspection has meant that the capacity to complete this work has been reduced but it continues to be a priority and we remain confident that this remaining workflows will be actioned as required.
2.	Short Stay Policy The service should reassess short stay placements in a timely manner, in line with the ASC policy. This will ensure that clients are transitioned to permanent care and undergo a full means tested financial assessment as they become applicable. New Recommendation 2024/2025	High	December 2025	March 2026	Revised Target March 2026 – part of wider review work Work of the Achieving Better Outcomes and Value (ABOV) group is targeting shorts stays within the wider review work. Guidance on short stays has been issued to the workforce. Reason for slippage Resource challenges in relation to the ABOV and wider social work teams, which are being

Appendix 1a Summary of progress on audit report recommendations

Adu	Adult Social Care – Residential Care Payments 2024/25 FFS Review								
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
					addressed by agency and permanent recruitment.				
3.	Backlog of Financial Assessments The Adult Social Care Service to Liaise with the Revenues and Benefits Service to agree a permanent Structure for the Client Finance Team which undertakes client financial assessments. The backlog of financial assessments should be addressed. The oldest outstanding items should be dealt with a priority. New Recommendation 2024/2025	High	December 2025		On Target Targeted work is being completed to reduce the backlog of financial assessment and there has been a 25% reduction in the last 3 months. Contact has been made with those awaiting a financial assessment to ensure that they are aware of the process and that they made be required to contribute towards the cost of their services. Additional staff (via Civica) have been brought in to support with the backlog of Financial Assessments, and over the last two months we				
					have seen a reduction.				
4.	Back dated adjustments Payments for care packages should be put in place at the inception of any care agreements and not allowed to go for many months without the payment being paid. Brought forwards from 2023/24	High	Brought forward from 2023/24 September 2025	March 2026	Revised Date to enable system changes March 2026 (due to Mosaic System Upgrade – this cannot be completed before that.) Reporting put in place has given greater oversight and identifies changes in payments on a monthly basis and is supporting identification of cases that need reviewing leading to quicker resolution of any issues.				
					Reporting tools now allow the Brokerage Team better oversight of payment delays, with escalation in place where this relates to provide				

Adult Social Care – Residential Care Payments 2024/25 FFS Review

No	Recommendation	Priority	Original Implementation	Revised Implementation	Progress update October 2025
			Date	Date	documentation or information required form elsewhere in the system. Brokearge now retains the purchase even where there is a query with another part of ASC rather than returning the workflow, this avoids unpurchased packages being lost in the system and provides better oversight. Monitoring shows that Oldham now benchmarks as the second shortest wait time in GM for purchase requests. Regular communication takes place with providers to ensure packages do not commence before a purchase order is in place for payment. The system delays have been raised as part of a recent health check by the Access group who supply the system to review usage and suggest improvements to reduce the risk of work not progressing correctly in the system. Reason for slippage Implementing the Mosaic Changes will be delayed due to the requirement for a system upgrade to Mosaic scheduled for February 2026. The work required by the Mosaic Team in advance of this will limit the ability to make changes prior to this date.

Appendix 1a Summary of progress on audit report recommendations

Adu	Adult Social Care – Residential Care Payments 2024/25 FFS Review								
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025				
5.	Invoices paid outside the Mosaic system Payment cycles to be manually adjusted accordingly when an ad hoc payment is made outside of the Mosaic system. New Recommendation 2024/2025	High	July 2025	Complete	Completed by the deadline, however we will continue to remind staff regularly around this. Staff have been reminded of the need to ensure any payments made outside of the system and recorded and adjusted for appropriately. Instances of payments outside of the system are infrequent.				
6.	Statutory Annual Care Reviews The service should utilise the benchmarking information available in comparison to other North-West region authorities to identify where Oldham would appear to perform relatively less well than neighbouring Councils. Where areas for improvement are identified as a result of benchmarking, the service should approach and liaise with better performing Councils in order to identify any improvements which may be made. Brought forward from previous years.	High	Brought forward from previous years December 2025	March 2026	Revised Implementation Date March 2026 Agency Staff and Contract and Quality Monitoring Officers are being utilised to reduce the backlog of overdue annual reviews. We have seen a reduction in the Review waiting list over the last two months the trajectory of this has been reviewed and the revised implantation date takes this into account. Reason for slippage Resource challenges in relation to the ABOV and wider social work teams, which are being addressed by agency and permanent recruitment.				
7.	Out of Borough Placements Management should utilise the benchmarking information available in comparison to other North-West region authorities to understand why Oldham	Medium	Brought forward from 2023/24 September 2025	March 2026	Revised Implementation March 2026 The OOB position continues to be regularly monitored, and the new authorisation processes implemented give greater oversight and				

Appendix 1a Summary of progress on audit report recommendations

Brought forwards from 2021/22

Adult Social Care - Residential Care Payments 2024/25 FFS Review Original Progress update October 2025 Recommendation Revised No Priority **Implementation Implementation** Date Date is spending the most on Out of Borough assurance of cases. Benchmarking analysis placements compared against other authorities in evidences that the authority is no longer the the North-West and consider what steps can be highest spend in the North-West on OOB taken to reduce these costs to be in line with placements. neighbouring / comparable sized authorities. The ABOV Team review work will target this amongst the matrix approach to priority of Brought forwards from 2023/2024 reviews. Revised inline with trajectory or review work completion. Reason for slippage Capacity challenges in relation to the ABOV and wider social work teams, which are being addressed by agency and permanent recruitment. Credit notes description Medium Brought forward Complete Completed by the deadline, however we will from 2021/22 continue to remind staff regularly around this. The description on all credit notes raised should Reminders have been issued to staff in have clear information on it to point out what period Brokerage and Client Finance to ensure that full August 2025 it is for and how it has been calculated. descriptions are included on credit notes issued. In order that the reader of the credit note can understand what is being adjusted – the description of "Financial Reassessment" may not be sufficient to understand why the credit note is required or how the amount of the correction has been arrived at.

Appendix 1a Summary of progress on audit report recommendations

Adult Social Care - Residential Care Payments 2024/25 FFS Review Original Progress update October 2025 Recommendation Priority Revised No **Implementation Implementation** Date Date Record of Hospital Stays N/A The business decision was made to not use this Low functionality for the reasons previously detailed. A schedule of hospital stays, is a specific document Alternative processes are in place to access within the Mosaic system. The service should hospital stay information. consider whether they wish to use this functionality to record periods when a client is in hospital and make it easier to physically locate individual clients. New recommendation 2024/2025 **Duplicate Records** Medium Brought forward Revised Implementation Date December 2025 10. December 2025 from 2020/21 Duplicate cases have been reviewed and 25+ cases have been merged during September. Staff should be reminded to check that a record does not already exist before setting up a new August 2025 Reminders to staff are being included in ASC Spotlight and activity will be picked up as part of record. the Data Quality group. Brought forward from 2020/21 Through our own monitoring we have seen a slight increase in duplicate records. Reason for slippage we will be completing targeted activity following the CQC inspection. We will also be clarifying the baseline position of the total number of duplicates which cannot be merged due to audit (where there has been purchase on both cases).

Adult Social Care - Direct Payments and Community Homecare 2024/25 FFS Review **Priority** Original Revised Progress update October 2025 Recommendation No Implementation Implementation Date Date December 2025. Workflow / data quality Brought forward Revised Implementation Date December 2025. High from previous The number has been significantly reduced from years. a position of 1,332 in February to 425 at the The service should continue in the implementation start of September. Work is progressing to close of their recovery plan to address outstanding the remainder of these with targeted work being workflow requirements. September 2025 completed on historical safeguarding workflows, The Data Quality group should focus on dealing ensuring that people are safe and free from with the oldest outstanding workflow items. harm. Brought forward from previous years. Reason for slippage Resource pressures across ASC and the recent notification of CQC inspection has meant that the capacity to complete this work has been reduced but it continues to be a priority and we remain confident that this remaining workflows will be actioned as required. Completed by the deadline, however we will **Direct Payments Agreements** High August 2025 Complete continue to remind staff regularly around this. Each client who receives a Direct Payment, should have a signed DPA. Staff have been reminded of the importance of checking DPAs are fully signed before being uploaded. The DP policy has been reviewed, When DPAs are signed they should be dated and the officer signing the DPA should complete their updated and recently published on the council's position in the field provided to set out who has website signed off the DPA. New recommendation in 2024/2025

Adult Social Care – Direct Payments and Community Homecare 2024/25 FFS Review

					15 044 000
No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
3.	Strategy and Performance reports should be used to highlight service users who are overdue an annual care review. The service should utilise the benchmarking information available in comparison to other North-West region authorities to identify where Oldham would appear to perform relatively less well than neighbouring Councils. Where areas for improvement are identified as a result of benchmarking, the service should approach and liaise with better performing Councils in order to identify any improvements which may be made. Brought forward from previous years.	High	Brought forward from previous years. December 2025	March 2026	Revised Implementation Date of March 2026 Agency Staff and Contract and Quality Monitoring Officers are being utilised to reduce the backlog of overdue annual reviews. We have seen a reduction in the Review waiting list over the last two months. We have seen a reduction in the Review waiting list over the last two months. Reason for slippage Resource challenges in relation to the ABOV and wider social work teams, which are being addressed by agency and permanent recruitment.
4.	Payments for care packages should be put in place at the inception of any care agreements and not allowed to go for many months without the payment being paid. Brought forwards from 2023/24	High	Brought forwards from 2023/24 September 2025	March 2026	Revised Date to enable system changes March 2026 Reporting put in place has given greater oversight and identifies changes in payments on a monthly basis and is supporting identification of cases that need reviewing leading to quicker resolution of any issues.

Adult Social Care – Direct Payments and Community Homecare 2024/25 FFS Review

No	Recommendation	Priority	Original Implementation Date	Revised Implementation Date	Progress update October 2025
					The system delays have been raised as part of a recent health check by the Access group who supply the system to review usage and suggest improvements to reduce the risk of work not progressing correctly in the system. Reason for slippage Implementing the Mosaic Changes will be delayed due to the requirement for a system upgrade to Mosaic scheduled for February 2026. The work required by the Mosaic Team in advance of this will limit the ability to make changes prior to this date.
5.	Backlog of Financial Assessments The Adult Social Care Service to Liaise with the Revenues and Benefits Service to agree a permanent Structure for the Client Finance Team which undertakes client financial assessments. The backlog of financial assessments should be addressed. The oldest outstanding items should be dealt with a priority. New Recommendation 2024/2025	High	December 2025		On Target Reporting put in place has given greater oversight and identifies changes in payments on a monthly basis and is supporting identification of cases that need reviewing leading to quicker resolution of any issues. The system delays have been raised as part of a recent health check by the Additional staff (via Civica) have been brought in to support with the backlog of Financial Assessments, and over the last two months we have seen a reduction.
6.	Credit Notes	Medium	August 2025	Complete	Completed by the deadline, however we will continue to remind staff regularly around this.

Appendix 1a Summary of progress on audit report recommendations

Adult Social Care – Direct Payments and Community Homecare 2024/25 FFS Review

No	Recommendation	Priority	Original	Revised	Progress update October 2025
			Implementation Date	Implementation Date	- 1-5
	The description on all credit notes raised should have clear information on it to point out what period it is for and how it has been calculated. In order that the reader of the credit note can understand what is being adjusted – the description of "Credit raised as FA reviewed" is not sufficient to understand why the credit note is required or how the amount of the correction has been arrived at. Initially raised in 2021/22 and was subsequently signed off as completed.				Reminders have been issued to staff in Brokerage and Client Finance to ensure that full descriptions are included on credit notes issued.
7.	Duplicate records Staff should be reminded to check that a record does not already exist before setting up a new record. New recommendation to D.P. report. Brought forward from 2020/21 on the Residential Homes report.	Medium	August 2025	December 2025	Revised Implementation Date December 2025 Duplicate cases have been reviewed and 25+ cases have been merged during September. Reminders to staff are being included in ASC Spotlight and activity will be picked up as part of the Data Quality group. Reason for slippage We will be completing targeted activity following the CQC inspection. We will also be clarifying the baseline position of the total number of duplicates which cannot be merged due to audit (where there has been purchase on both cases).
8.	Record of hospital stays	Low	N/A		The business decision was made to not use this functionality for the reasons previously detailed.

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New recommendation 2024/2025

Adult Social Care - Direct Payments and Community Homecare 2024/25 FFS Review Recommendation Priority Original Revised Progress update October 2025 No Implementation Implementation Date Date A schedule of hospital stays, is a specific document Alternative processes are in place to access within the Mosaic system. The service should hospital stay information. consider whether they wish to use this functionality to record periods when a client is in hospital, and make it easier to physically locate individual clients, allow re-allocation of Homecare resources where these are not currently required.

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