APPENDIX A

Internal Audit Recommendations – Progress Update

Department of Community and Children's Services (DCCS) | Quarter 2, 2026/27

Reporting basis: Internal Audit dashboard dated 8 October 2026, supplemented by service updates received up to 27 October 2026.

The DCCS Safeguarding Internal Audit review received a Substantial Assurance opinion in April 2026. The 8 October dashboard recorded three open recommendations: two low-risk and one medium-risk. Service updates demonstrate progress, but formal closure by Internal Audit has not been confirmed.

1350 Terms of Reference – Governance Forums

Original Internal Audit recommendation	a. The format for terms of reference used by DCCS (and People's Directorate) should be reviewed and a template provided, which includes version control. b. The terms of reference listed should be brought up to date. c. A central record should be maintained of all terms of reference and key version information, to help manage review and update. d. Departmental Leadership Team (DLT) should include annual review on the forward plan agenda to confirm that terms reference have been subject to update and approval. e. A consistent template for recording and monitoring service development action plans should be introduced.
Risk / original target	Low | 30 July 2026
Reporting status	Open – subject to audit confirmation
Latest service update	On 9 October, the service submitted completed actions and available supporting evidence to Internal Audit. The service also advised that a standard service development plan format is not practicable in all cases because governance and regulatory requirements differ. Acceptance of the evidence and any closure remain unconfirmed.
Outstanding action	Confirm which elements Internal Audit has accepted as complete; agree the position on service development plan standardisation and any revised completion dates.

1351 Procedures Update

Original Internal Audit recommendation	a. The Adult Social Care Safeguarding Process should be brought up to date. b. A future review date should be added to the Adult Social Care (ASC) Prevention and Early Intervention procedure. c. DLT should include annual review on the forward plan agenda to confirm that policies and procedures have been subject to update and approval in accordance with the stated review dates.
Risk / original target	Low | 30 June 2026
Reporting status	Open – partially progressed
Latest service update	Following the Care Quality Commission (CQC) report, the service is rewriting ASC safeguarding policies and procedures, with completion anticipated by February 2027, followed by the relevant governance approvals. A March 2027 review date has been added to the ASC Prevention and Early Intervention procedure. The annual DLT review action remains assigned within the service and depends on completion of the policy updates.
Outstanding action	Provide evidence of the revised procedure review date; confirm governance approval arrangements and the DLT forward-plan action; agree revised completion dates.

1352 Training Log – System Implementation

Original Internal Audit recommendation	a. The reporting functionality of the new training log system should continue to be explored to assess the monitoring data available with regards to mandatory and refresher safeguarding training completion. b. The reporting required by each governance forum should be agreed.
Risk / original target	Medium | 30 September 2026
Reporting status	Open – in progress
Latest service update	The SAP training log reporting functionality is not yet fully available. Work with Corporate Learning and Organisational Development is ongoing to confirm access and reporting requirements. Reporting arrangements between the Workforce Development Board and management forums are still being considered, including whether these should be reflected in the forums' terms of reference. An overview is expected once SAP functionality permits; no timescale has been confirmed.
Outstanding action	Confirm system access and reporting capability, agree reporting to governance forums, provide supporting evidence and confirm a revised target date.

Note: The original target dates are retained from the 8 October dashboard. No recommendation is presented as closed until confirmed by Internal Audit. Revised completion dates and supporting evidence remain subject to confirmation.