

Final Internal Audit Report

Live Well – Active Lifestyle Team

May 2019

Distribution: Executive Director of Place (Final only)
Director of District Centres and Regeneration
Head of Active Lifestyles
Live Well Programme Manager
Head of Litigation & Corporate Law
Corporate Solicitor

Assurance Level	Recommendations Made	
Limited Assurance	Priority 1	1
	Priority 2	6
	Priority 3	0

Confidentiality and Disclosure Clause

This report ("Report") was prepared by Mazars LLP at the request of London Borough of Croydon and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

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Please refer to the Statement of Responsibility in Appendix 3 of this report for further information about responsibilities, limitations and confidentiality.

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1. Introduction

- 1.1 The Live Well Croydon programme is an integrated health behaviour change service for residents.
- 1.2 This programme includes support for those who need help to stop smoking, maintain a healthy weight, take more exercise, reduce alcohol intake and support mental wellbeing.
- 1.3 The programme is available to residents aged 16+ who would like to participate and are willing to make a change to their chosen lifestyle behaviour, subject to eligibility criteria.
- 1.4 Croydon has introduced a 'JustBe' website. The website offers advice, hints and tips on a range of health behaviours. In addition, there is a Health MOT which aims to offer users a range of tools and resources to help them to self-manage particular behaviours and provides the access route into the Health MOT for the face to face service.
- 1.5 The Live Well programme supports residents to address 5 key lifestyle behaviours:
 - Be Happy
 - Be Active
 - Be Alcohol Aware
 - Be Food Smart
 - Be Smoke Free
- 1.6 The JustBe website includes apps, podcasts, expert advice, videos, diet plans and physical activity opportunities to help residents access a self-manage route.
- 1.7 The objectives, methodology and scope are contained in the Audit Terms of Reference at Appendix 1.

2. Key Issues

Priority 1 Issues

A signed contract was not in place for the Croydon University Hospital (CUH), **(Issue 3)**.

Priority 2 Issues

The Communications Strategy is yet to be developed into the Live Well Programme Strategy, **(Issue 1)**.

The validity of the claims made by one of the four providers of the Live Well Programme – CUH is being questioned, **(Issue 2)**.

The privacy statement does not document how long information will be retained for, **(Issue 4)**.

There is no Terms of Reference (ToR) in place nor meeting minutes taken for the Live Well Programme Board (LWPB), **(Issue 5)**.

The risk register for the Live Well Programme does not have assigned risk owners for associated issues, **(Issue 6)**.

The Live Well Programme is not on track to meet its target number of participants, **(Issue 7)**.

3. Actions and Key Findings/Rationale

Control Area 1: Legislations, Organisational and Management Requirements – The Strategy	
Priority	Action Proposed by Management
2	<p>Live Well has been awarded an additional one year extension, taking the service to end March 2020. The Live Well communication & marketing plan is in progress and will be finalised and agreed by the Live Well Communications group at their next meeting on 16th November.</p>
Detailed Finding/Rationale – Issue 1	<p>This Communications Strategy sets out how the Live Well Programme will assist residents to make use of the JustBe Croydon website in addition to other aspects of the programme.</p> <p>Discussion with the Live Well Programme Manager (LWPM) identified that there is not an up-to-date Communications Strategy in place, however a communications plan was developed and was in place for 2017-18. Originally, the aim was to have a Communications Strategy agreed by the end of quarter two, however there is a bid for a proposed extension of the programme on 13 September 2018 for an April 2019-March 2020 programme extension. Therefore, the strategy has been delayed until the outcome of the extension is known.</p> <p>Where a Communications Strategy is not in place prior to the commencement of the financial year, there is a risk that the communications plan is not fully delivered and the residents of Croydon are not receiving the maximum benefits of the Live Well Programme.</p>
Responsible officer	Deadline
Live Well Programme Manager	15 May 2019

Control Area 2: Public Awareness and Communication

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 2
2	<p>In their capacity of Live Well commissioner, the contract management of CUH and other external providers was transferred to the C & P team (Commissioning & Procurement), in October 2018. Consequently, C & P are responsible for:</p> <ul style="list-style-type: none"> Mitigating the risks associated with the validity of reported client adherence and the failure to provide a holistic service offer to clients. <p>Operational aspects of the service will continue to be managed by the Live Well Programme Manager.</p>	<p>There are four providers who are responsible for delivering the Live Well Programme; Croydon University Hospital (CUH), MIND, Primary Care and the Internal Live Well Team at LBC. Information regarding the programmes that the providers are engaged with is submitted through 'PharmOutcomes' on a monthly basis and anonymises information.</p> <p>Discussion with the LWPM explained that there are concerns over the promotion of all disciplines (i.e. smoking, weight, alcohol, sexual health and mental wellbeing) within CUH, as the majority of the claims made are smoking cessation, which are also the biggest fee earners. The smoking cessation is also having a 100% success rate, which suggests that no one has dropped out of the programme and staff are not sure that this is correct.</p> <p>The LWPM as the result of the above has written an options paper for consideration regarding reliability of the statistics from CUH and ways, in which the outturns can be better managed. Actions arising are being progressed. (Because of these actions, although the issue is significant, only a priority 2 issue has been raised.)</p> <p>Purchase orders and invoices are being raised and paid for work undertaken by CUH. The last invoice for the 2017/18 financial year - March 2018 was £12,695.00.</p> <p>Where the validity of results being reported through 'PharmOutcomes' is questioned, there is a risk that the Live Well Programme funding is being spent on inaccurate deliverables.</p>
Responsible officer	Deadline	
Category Manager / Live Well Programme Manager	15 May 2019	

Control Area 3: Liaison with Work with Health, Community, and Voluntary Groups – Contracts not signed

Priority		Action Proposed by Management	Detailed Finding/Rationale – Issue 3
1	As above; C & P are contract managing CUH:	<ul style="list-style-type: none"> • Management of the process in respect of the unsigned contract. • Addressing the validity of reported adherence data. 	<p>Contracts between LBC and Live Well Providers ensure that expectations, payments and terms and conditions are agreed prior to the delivery of the programme being carried out.</p> <p>It was established that one out of three of the external providers, CUH has not signed the contract for the delivery conditions of the Live Well Programme. In addition, there is currently disputes taking place over the validity of the outputs from CUH and the promotion of all areas within the Live Well Programme.</p> <p>Where contracts are in place, but are not signed by both parties involved, there is a risk that if any disputes arise LBC will not be in the position to hold the contractors liable for not meeting contractual arrangements.</p>
Responsible officer		Deadline	
Category Manager		15 May 2019	

Control Area 3: Liaison with Work with Health, Community, and Voluntary Groups	
Priority	Action Proposed by Management
2	<p>The understanding was that the sentence would be removed from the Privacy Notice and a time scale included for destruction of data. The Live Well Project Manager agreed to do this.</p> <p>Looking at the site, the changes have yet to be made.</p> <p>The Live Well Project Manager has been asked again and he said he has requested that the sentence is removed. He is also liaising with the database owner – PharmOutcomes, about whether information can be deleted selectively.</p> <p>The risk is minimal as penalties from the ICO are only incurred if harm has been suffered. There is no risk that that sufficient harm could ever be caused from not specifying the retention period. Fines are for losses, not retention periods.</p>
	<p>Detailed Finding/Rationale – Issue 4</p> <p>According to the Information Commissioners Office (ICO) – ‘You must provide individuals with information including: your purposes for processing their personal data, your retention periods for that personal data, and who it will be shared with. We call this ‘privacy information’.</p> <p>The Croydon JustBe website has an attached privacy statement regarding the data that is completed by applicants. However, the privacy statement does not include how long the data will be stored for.</p> <p>The Service explained that, the Council’s Legal team had approved and signed off the terms & conditions and privacy policy for the Just Be website and had confirmed that the site is fully GDPR compliant.</p> <p>Where the Croydon JustBe website is not compliant with the DPA 2018, there is a risk that the Council may not be able to demonstrate that it has been duly diligent and should a data breach occur that the Council will have a limited defence.</p>
Responsible officer	Deadline
Live Well Project Manager	15 May 2019

Control Area 6: Monitoring of Outcomes – ToRs and Meeting Minutes		Detailed Finding/Rationale – Issue 5
Priority	Action Proposed by Management	<p>ToRs set out the requirements of any groups/committees/boards that are put in place to advise/make decisions/monitor areas within the Council. Meeting minutes help to evidence that the requirements as per the ToRs are carried out.</p> <p>The Live Well Programme Board (LWPB) is the main board responsible for providing oversight of the Live Well Programme. There is no ToR for the LWPB and meeting minutes are not taken for this board. A monthly monitoring tracker is produced instead of meeting minutes, which details action logs and RAG rated risks, in addition to issues. However, it does not record when meetings are held or officers who attended meetings.</p> <p>It was further discussed that the LWPB has been disbanded and a decision is yet to be made where the Live Well programme will sit strategically going forwards. Two options are 'The Together for Health Board' or 'One Croydon Alliance'.</p> <p>Where ToRs are not in place, there is a risk that boards do not act as expected in addition to decisions not being made by the correct authority levels. Where meeting minutes are not taken, there is no evidence to support that the LWPB is acting in accordance with expectations as per the ToR.</p>
2	Discussions are underway with the Live Well commissioning team as to the most appropriate board to oversee the Live Well service.	
Responsible officer	Deadline	
Consultant in Public Health / Category Manager	15 May 2019	

Control Area 7: Programme Review – Risk Owners

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 6
2	Risk owners have now been identified in the current Live Well programme risk register.	Risk owners help to ensure that risks identified, as per the risk registers, are the responsibility of an assigned responsible officer. A risk register is in place for the Live Well Programme. The risks are RAG rated and have mitigating actions attached. However, there are no assigned risk owners assigned to risks.
Responsible officer Live Well Programme Manager	Deadline Completed	Where identified risks do not have associated risk owners, there is a risk that any identified issues will not be actively monitored and controlled which can lead to the risk consequences taking place.

Control Area 7: Programme Review – Programme Targets

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 7
2	A meeting will take place with Commissioners on 6 th November 2018 to review the Live Well eligibility criteria, the outcomes of which will inform the intended review of the KPI targets planned for early January 2019.	<p>Targets are put in place to help keep the Live Well Team motivated.</p> <p>Discussion with the Live Well Programme Manager identified that at the start of the programme, there was a target number of 4,500 participants that the programme was aiming to help. At the start of September 2018, the total figure of participants who have participated in the programme has been 1,361. The original figure of 4,500 was based on pharmacies and GP's delivering the Live Well Programme however this did not transpire. The target numbers were not adjusted to reflect this.</p> <p>It was advised that, once the extension for the programme goes to the board in September 2018 for the Live Well Programme extension, the targets would be re-assessed.</p> <p>Where targets are not representative of current situations and conditions, there is a risk that targets are unachievable and as a result demotivate staff.</p>
Responsible officer Consultant in Public Health / Category Manager	Deadline 15 May 2019	

TERMS OF REFERENCE

Live Well Programme

1. INTRODUCTION

- 1.1 The Live Well Croydon programme is the integrated health behaviour change service for residents.
- 1.2 This programme includes support for those who need help to stop smoking, maintain a healthy weight, take more exercise, reduce alcohol intake, and support mental wellbeing.
- 1.3 The programme is available to residents aged 16+ who would like to participate and are willing to make a change to their chosen lifestyle behaviour, subject to eligibility criteria.
- 1.4 Croydon has introduced a 'JustBe' website. The website offers advice, hints and tips on a range of health behaviours. In addition, there is a Health MOT which aims to offer users a range of tools and resources to help them to self-manage particular behaviours and provides the access route into the Health MOT for the face to face service.
- 1.5 The JustBe Croydon website covers 5 key lifestyle behaviours: ;
 - Be Happy
 - Be Active
 - Be Alcohol Aware
 - Be Food Smart
 - Be Smoke Free
- 1.6 The website also includes apps, podcasts, expert advice, videos, diet plans and physical activity opportunities to help residents access a self-manage route.
- 1.7 This audit is being undertaken as part of the agreed Internal Audit Plan for 2018/19.

2. OBJECTIVES AND METHODOLOGY

- 2.1 The overall audit objective is to provide an objective independent opinion on the adequacy and effectiveness of the control environment relating to the 'Live Well' (Active Lifestyle Team).
- 2.2 In order to achieve the overall objectives, a risk based systems audit approach will be carried out, documenting and evaluating the actual controls against those expected and based on this, undertaking appropriate testing conducted.
- 2.3 The key findings, conclusions, and subsequent issues arising will be presented at an exit meeting and followed by the circulation of a draft report for consideration by management. This prior to agreement and issue of the final audit report.

3. SCOPE





3.1 This audit will examine the Council's arrangements in relation to Legal Services, and will include the following areas:

Control Areas/Risks	Issues Identified		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Legislation, Organisational and Management Requirements	0	1	0
Public Awareness and Communications	0	1	0
Liaison with Work with Health, Community, and Voluntary Groups	1	1	0
Provision of Training	0	0	0
Information Management	0	0	0
Monitoring Outcomes	0	1	0
Programme Review	0	2	0
Lessons Learned and Actions Arising	0	0	0
TOTAL	1	6	0

DEFINITIONS FOR AUDIT OPINIONS AND RECOMMENDATIONS

In order to assist management in using our reports:

We categorise our **audit assurance opinion** according to our overall assessment of the risk management system, effectiveness of the controls in place and the level of compliance with these controls and the action being taken to remedy significant findings or weaknesses.

	Full Assurance	There is a sound system of control designed to achieve the system objectives and the controls are consistently applied.
	Substantial Assurance	While there is basically a sound system of control to achieve the system objectives, there are weaknesses in the design or level of non-compliance which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and/or non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or weak and/or there are high levels of non-compliance, leaving the system open to the high risk of error or abuse which could result in financial loss and/or reputational damage.

Priorities assigned to recommendations are based on the following criteria:

Priority 1 (High)	Fundamental control weaknesses that require the immediate attention of management to mitigate significant exposure to risk.
Priority 2 (Medium)	Control weakness that represent an exposure to risk and require timely action.
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, action to address still provides an opportunity for improvement. May also apply to areas considered to be of best practice.

STATEMENT OF RESPONSIBILITY

We take responsibility to the London Borough of Croydon for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

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