

# Final Internal Audit Report

## Disclosure and Barring Service (DBS)- Renewals

### March 2023

Distribution: Interim Assistant Chief Executive  
Chief People Officer  
Head of Recruitment  
Recruitment Resourcing Executive  
Corporate Director of Resources and S151 Officer

Assurance Level	Issues Identified	
Substantial Assurance	Priority 1	0
	Priority 2	2
	Priority 3	2

#### 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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3. Statement of Responsibility

## **1. Introduction**

- 1.1 The Disclosure and Barring Service (DBS) was established in December 2012 under part V of the Protection of Freedoms Act to undertake disclosure and barring functions.
- 1.2 The Revised Code of practice for DBS Registered Persons 2015 sets out in its introduction that this “*Code of Practice applies to all Registered Bodies with the DBS under section 120 of the Police Act 1997 (Registered Bodies) and recipients of Update Service information under section 116A of the Police Act 1997.*”
- 1.3 DBS certificates are now only provided to the applicant. Applicants can then supply their employer with the certificate which will contain the disclosure information. Recipients of disclosure information must note that it is an offence to disclose information contained within a DBS certificate to any person who is not a member, officer or employee of the Registered Body or their client, unless a relevant legal exception applies.
- 1.4 DBS checks, a key safeguarding check, are only accurate on the day issued, becoming out of date immediately thereafter. Except where the ‘DBS Update Service’ is in place. The DBS Update Service allows applicants to keep their DBS certificates up to date and employers to check a DBS certificate. This service is for standard and enhanced DBS checks only.
- 1.5 The DBS advises providers or managers to have a policy that outlines how they will carry out, record, and manage checks and certificates, and the circumstances when a further check may be requested.
- 1.6 It is Croydon Council Policy that all DBS checks are renewed after three years for all staff who have undergone a disclosure check, providing they are undertaking the same duties and responsibilities that required the original disclosure clearance.
- 1.7 The DBS Renewals Team at Croydon uses an electronic DBS service called Atlantic Data for DBS applications and then manually update the internal HR software package, Oracle, with the result and the date the DBS was issued.
- 1.8 Reports are run from data recorded in Oracle in the first week of each month to highlight which staff are within 90 days of their DBS expiring. The reports use a traffic light system to categorise staff. This is as follows:
  - Green – Between 90 and 61 days before expiry;
  - Yellow – Between 60 and 31 days before expiry;
  - Orange – Between 30 and 1 days before expiry; and
  - Red – Expired.
- 1.9 At the time of our review (November 2022), eight staff were designated red, six staff were designated amber, four staff were designated yellow, and 70 staff were designated green.

- 1.10 Emails from the DBS Renewals Team are sent to staff when they first appear on the report informing them that their DBS needs to be renewed. The email states that an appointment will need to be scheduled with the Renewals Team to apply for a DBS check and it lists the documentation they will need to provide.
- 1.11 When a staff member's DBS check has expired and they are working during the re-application process, a risk assessment will be carried out by their line manager. Efforts will also be made to restrict these staff from being in 1:1 contact with children or vulnerable adults, either by restricting their workload or ensuring they are supervised.
- 1.12 The DBS Renewals Team is managed by the Head of Recruitment who reports to the Chief People Officer.
- 1.13 While the audit and testing were performed remotely, we have been able to obtain all relevant documents required to complete the review.
- 1.14 This audit was undertaken as part of the 2022/23 Internal Audit Plan agreed by the Council Audit Committee. The objectives, approach and scope are contained in the Audit Terms of Reference at Appendix 1.

## 2. Key Issues

### Priority 2 Issues

There is no formal management information reporting to senior management for oversight of DBS checks and renewals. **(Issue 1)**

There was one instance of a risk assessment not being carried out for a staff member who had an expired DBS while still at work. **(Issue 2)**

Priority 3 issues are included under Section 4 below.

### 3. Actions and Key Findings/Rationale

#### Audit Area: Management Reporting

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 1				
2	We will add DBS check data to our monthly DMT dashboards, flagging cases for renewal/action.	<p><b>Expected Control</b></p> <p>Management information, including appropriate KPIs, pertaining to DBS Checks and Renewals should be formally captured and reported regularly to senior management during internal meetings to highlight and resolve potential issues and areas for improvement.</p> <p><b>Finding/Issue</b></p> <p>Internal audit was informed by the Head of Recruitment and the Chief People Officer that there was no written protocol in place which highlighted the breakdown of the management and reporting structure in place for DBS renewals. Additionally, the DBS Team did not at the time of audit report performance related to management of DBS Renewals.</p> <p><b>Risk</b></p> <p>No reporting and management oversight in relation to DBS Renewals data can make it difficult to identify potential issues and take corrective actions in a timely manner. This can result in DBS Renewals being missed and staff members with an expired DBS performing work without the required supervision as per the councils' DBS Policy.</p>				
	<table border="1"> <thead> <tr> <th>Responsible Officer</th> <th>Deadline</th> </tr> </thead> <tbody> <tr> <td>Head of Recruitment</td> <td>1/6/2023</td> </tr> </tbody> </table>	Responsible Officer	Deadline	Head of Recruitment	1/6/2023	
Responsible Officer	Deadline					
Head of Recruitment	1/6/2023					

**Audit Area: Risk Assessments**

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 2
2	<p>We will use the dashboard data from action 1 above to track risk assessment cases and ensure that DMTs / managers put a risk assessment in place on expiry of a DBS.</p>	<p><b>Expected Control</b></p> <p>Risk assessments should be completed for staff that are working whilst their DBS check has expired and are awaiting a re-issue. The risk assessment should be used to ensure that there is no access to children, vulnerable adults or sensitive personal information whilst not having a valid DBS in place.</p> <p><b>Finding/Issue</b></p> <p>From a DBS staff report, audit identified 28 instances of DBS checks expiring in 2022 and of these, eight were overdue as of the audit start date (i.e. 7 November 2022). Further review of these eight identified:</p> <ul style="list-style-type: none"> <li>• Five staff were absent from work while their DBS expired. Two were on long term sick leave, one was on an extended leave of absence, and one had been suspended since January 2022;</li> <li>• One staff member had their DBS issued ahead of expiry but due to system error they were included on the renewal list when they should not have been; and</li> <li>• Two staff were still working during this period of expiry. The DBS of one staff member fell on a non-working day and their DBS had been issued on their return to work so no risk assessment was needed. However for the other staff member, they were working while having an expired DBS. This expired on 24 September 2022 and was re-issued on 24 October 2022. We were provided with email evidence that their line manager had been informed of the impending expiry of their DBS and the consequences that would follow; this included that their duties should be restricted so that 1:1 time with vulnerable adults or children was avoided or they should be supervised by another member of staff. However, a risk assessment form was not filled out to evidence whether their duties would need to be restricted or their work supervised. Management stated that they were not aware of a risk assessment form, however there is a risk assessment form template enclosed within the appendices of the DBS Policy.</li> </ul>

		<p>We confirmed the DBS Policy states under a section titled ‘<i>Commencement of work prior to receipt of DBS disclosure certificate</i>’ that the line manager must undertake a risk assessment to determine and ensure safeguards are in place so that no unsupervised access to children or vulnerable adults takes place. The manager should then submit this assessment to a Director for an individual to work without a disclosure certificate.</p> <p>It should be noted, however that this section is specific to new starters that do not have a DBS check in place prior to commencement of their employment; the Policy does not cater to those staff whose DBS expires whilst in employment at the Council.</p> <p><b>Risk</b></p> <p>Where risk assessments are not completed for staff that are working whilst their DBS check has expired, there is a risk that they will have unsupervised access to children or vulnerable adults.</p>
Responsible Officer	Deadline	
Head of Recruitment	1/6/2023	

**4. Priority 3 Findings**

**Audit Area: Legislative, Organisational, and Management Requirements**

Agreed action	Findings
<p><b>Control Area 1: Legislative, Organisational, and Management Requirements</b></p> <p><b><u>Action proposed by management:</u></b></p> <p>Update the DBS policy and guidance for renewals.</p>	<p><b>Expected Control</b></p> <p>A set of procedural guidance is in place related to DBS renewals that effectively details the process staff should follow.</p> <p><b>Finding/Issue</b></p> <p>Through conversations with management it was confirmed that there is no procedural guidance in place that relates to DBS renewals. There is only a section within the overarching DBS Policy that covers DBS renewals:</p> <p><i>'Individuals will be required to present their original Disclosure certificate to the Recruitment team, or in the case of schools the Head Teacher or designated person for verification and recording as in 8.2 and 8.3 above. Individuals must present their certificate within 7 working days of receipt. Failure to do so may lead to pay being suspended, disciplinary action and/or removal from duties'.</i></p> <p>There is an internal process in place for DBS renewals and it involves a report being generated at the start of each month from Oracle, the Council’s HR package. This report lists all staff that are within 90 days of their DBS check expiring. Emails are sent to staff members when they appear on this report which contains information related to what documents they need to provide and booking an application appointment. However, this process is not formally documented in the form of dedicated guidance or included within the DBS Policy.</p> <p><b>Risk</b></p> <p>Where there is no procedural guidance in place relating to a key internal process such as DBS renewals, there is a risk that current or new staff may not be aware of the process. This could result in staff working in a role that requires a DBS check without one.</p>



Agreed action	Findings
<p><b>Audit Area 4: Monitoring and Record Keeping</b></p> <p><b><u>Action proposed by management:</u></b></p> <p>See action item 1 above. Maintain regular dashboard data to track all DBS checks and renewals and use this to flag action for DMTs / managers and to ensure accuracy of records.</p>	<p><b>Expected Control</b></p> <p>Monitoring and record keeping logs kept by the Council contain the most up to date and accurate data pertaining to DBS Renewals.</p> <p><b>Finding/Issue</b></p> <p>Internal Audit performed data analysis on the entire population held in the Council’s DBS Staff Report and found 26 instances of duplicate data.</p> <p><b>Risk</b></p> <p>Staff members’ DBS data are duplicated and not found and resolved in an appropriate timescale resulting in an accumulation of duplicate data points.</p>

## AUDIT TERMS OF REFERENCE

### Disclosure and Barring Service Renewals

#### 1. INTRODUCTION

- 1.1 The Disclosure and Barring Service (DBS) was established in December 2012 under Part V of the Protection of Freedoms Act to undertake disclosure and barring functions.
- 1.2 The revised Code of Practice for DBS Registered Persons 2015 confirms that DBS certificates are now only provided to the applicant. Applicants can then supply their employer with the certificate which will contain the disclosure information. Recipients of disclosure information must note that it is an offence to disclose information contained within a DBS certificate to any person who is not a member, officer or employee of the Registered Body or their client, unless a relevant legal exception applies.
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- 1.4 The DBS advises providers or managers to have a policy that outlines how they will carry out, record and manage checks and certificates, and the circumstances when a further check may be requested.
- 1.5 It is Croydon Council's Policy that all DBS checks are renewed after 3 years for all staff who have undergone a disclosure check providing, they are undertaking the same duties and responsibilities that required the original disclosure clearance.
- 1.6 This audit is part of the agreed Internal Audit Plan for 2022/23.

#### OBJECTIVES AND METHOD

- 1.7 The overall audit objective is to provide an objective independent opinion on the adequacy and effectiveness of controls / processes.
- 1.8 The audit will for each controls / process being considered:
  - Walkthrough the processes to consider the key controls;
  - Conduct sample testing of the identified key controls; and
  - Report on these accordingly.

### 3. SCOPE





3.1 The audit included the following areas (and number of issues raised):

Audit Area	Issues Raised		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Legislative, Organisational and Management Requirements	0	0	1
DBS Renewal process (manual or automatic, type of DBS required)	0	0	0
Risk Assessment	0	1	0
Monitoring and Record Keeping	0	0	1
Management Reporting	0	1	0
<b>Totals</b>	<b>0</b>	<b>2</b>	<b>2</b>

## Definitions for Audit Opinions and Identified Issues

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 constantly 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 of the controls which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or extremely weak, leaving the system open to the high risk of error, abuse, and reputational damage.

Priorities assigned to identified issues are based on the following criteria:

<b>Priority 1 (High)</b>	Fundamental control weaknesses that require immediate attention by management to action and mitigate significant exposure to risk.
<b>Priority 2 (Medium)</b>	Control weakness that still represent an exposure to risk and need to be addressed within a reasonable period.
<b>Priority 3 (Low)</b>	Although control weaknesses are considered to be relatively minor and low risk, still provides an opportunity for improvement. May also apply to areas considered to be of best practice that can improve for example the value for money of the review area.

## **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.

This report is confidential and must not be disclosed to any third party or reproduced in whole or in part without our prior written consent. To the fullest extent permitted by law Mazars LLP accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the Report, its contents, conclusions, any extract, reinterpretation amendment and/or modification by any third party is entirely at their own risk.

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