

Internal Audit Report

Corporate Property Helpdesk

23 February 2024

CD2310

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This Internal Audit review is conducted for the City of Edinburgh Council as an addition to the 2023/24 internal audit plan approved by the Governance, Risk and Best Value Committee in August 2023. The review is designed to help the City of Edinburgh Council assess and refine its internal control environment. It is not designed or intended to be suitable for any other purpose and should not be relied upon for any other purpose. The City of Edinburgh Council accepts no responsibility for any such reliance and disclaims all liability in relation thereto.

The internal audit work and reporting has been performed in line with the requirements of the Public Sector Internal Audit Standards (PSIAS) and as a result is not designed or intended to comply with any other auditing standards.

Although there are specific recommendations included in this report to strengthen internal control, it is management's responsibility to design, implement and maintain an effective control framework, and for the prevention and detection of irregularities and fraud. This is an essential part of the efficient management of the City of Edinburgh Council. Communication of the issues and weaknesses arising from this audit does not absolve management of this responsibility.

Executive Summary

Overall opinion and summary of findings

Management of the Corporate Property Helpdesk moved to Place Directorate from Corporate Services in September 2023. An operational review is due to be carried out by Facilities Management (FM) on the operation of the Helpdesk, and the findings from this audit will be used to inform that process.

Due to the timing of the transfer of responsibility, this work was performed as an advisory review which aims to identify improvement actions, instead of a traditional assurance audit of controls, therefore this report has no overall engagement rating, however priority ratings have been applied to recommendations.

Our review noted the following improvement actions:

- comprehensive procedures should be developed together with training materials which cover all aspects of the process
- quality assurance work should cover all aspects of the work, and be performed regularly
- the process for escalating issues with repairs should be documented

- performance monitoring and reporting arrangements should be strengthened and standardised, and action taken to ensure contractors meet required timescales
- role specific learning should be completed by all staff
- risks related to the corporate property helpdesk should be recorded and managed.

Areas of good practice

Our review identified:

- team discussions take place when there are changes in procedure, legislation, or further training is required
- CAFM is an efficient and user-friendly system
- repairs are logged by the Helpdesk in a timely manner to enable the contractor to respond quickly
- escalations are tracked and monitored effectively.

See Appendix 1 for Control Assessment and Priority Rating Definitions

| Audit Area | Control Design | Control Operation | Findings | Priority Rating |
|---------------------------------------|----------------|-------------------|--|-----------------|
| 1. Processes, Procedures and Training | | | Finding 1 – Procedures and Internal Training | High Priority |
| 2. Logging and allocation of repairs | | | See Finding 2 | Medium Priority |
| 3. Quality assurance | | | Finding 2 – Quality Assurance processes | Medium Priority |
| 4. Oversight and governance | | | Finding 3 – Performance Monitoring and Reporting | High Priority |
| 5. Risk Management | | N/A* | Finding 4 – Risk Management | Medium Priority |

Review Assessment

Internal Audit Report: CD2310 Corporate Property Helpdesk

Background and scope

The City of Edinburgh Council (the Council) has over 600 operational buildings and other non-operational assets (such as statues and monuments). Requests for repairs to these assets are made through the Corporate Property Helpdesk, either by email or phone, with the Helpdesk providing a single point of contact for reporting, managing, and organising these requests. The responsibility for management of the Helpdesk moved from Corporate Services to Place Directorate in September 2023.

In October 2023, 7,410 emails came through the helpdesk (which includes new requests, additional works and follow-up emails), with approximately 20 emergency calls per day. The Helpdesk uses the electronic system Civica (Computer Aided Facilities Management - CAFM) to log and manage requests.

Requests received are categorised as follows:

- Priority A: Critical 1-hour response, with 4-hour rectification
- Priority B: Emergency 4-hour response, with 1 day rectification
- Priority C: Urgent 1-day response, with 2-day rectification
- Priority D: Routine 2-day response, with 5-day rectification.

This review was carried out in response to issues raised by elected members and senior Council officers relating to timescales for the completion of repair requests, and the quality of work performed. These issues were raised prior to the transfer of Helpdesk responsibilities in September 2023.

Scope

The objective of this review was to assess the adequacy of design and operating effectiveness of the key controls established to ensure that there are effective processes to log, allocate, and monitor completion of repairs requests made through the Corporate Property Helpdesk.

As the responsibility for management of the Helpdesk has recently moved from Corporate Services to Place, this review focused on current controls in operation under the direction of Place and previous performance prior to the transfer in September 2023 to identify lessons learned.

Risks

- Service Delivery
- Regulatory and Legislative Compliance
- Reputational Risk
- Supplier, Contractor, and Partnership Management
- Health and Safety
- Governance and Decision Making
- Workforce.

Limitations of Scope

This review only considered corporate property repairs management, and not the other services provided by the Helpdesk (e.g., staffing management).

Reporting Date

Testing was undertaken between 19 December 2023 and 15 January 2024.

Our audit work concluded on 15 January 2024, and our findings and opinion are based on the conclusion of our work as at that date.

Findings and Management Action Plan

Finding 1 – Procedures and Internal Training

Documented and comprehensive procedures

Procedures are essential to ensure clear direction, clarity, consistency, compliance, and standardisation. In addition, they can be used to train new members of staff. Management advised that no written procedures were provided when the Helpdesk was transferred to Place from Corporate Services, therefore have developed basic documents for the process.

Officers should improve these guidance documents as they do not cover all aspects of the work, and do not provide sufficient detail for all processes. For example, there is no guidance for staff on how to input an estimated cost of a repair when logging a job. The documents also do not include version/change controls.

Logging repairs and status updates

Our review highlighted that there is no process for updating customers on a repair status. When customers log a repair, they are either sent an automated email from the system, or an email from Helpdesk officers confirming the repair has been logged with a reference number. Following this, no updates are provided on progress with the repair, and customers do not have access to the real time information on the Helpdesk system. Management have advised that a pilot 'Site FM report', which outlines all jobs on a specified site for a specified period, has been tested and is being considered for future use.

Customer Information

We reviewed the information on the intranet available to officers requesting repairs and noted that is does not set out the process for reporting repairs or provide a contact number (though an email address is supplied).

Approval process

When a repair is estimated to cost over £500, it requires approval from a manager. However, there are no documented instructions for the approvals process. During testing, it was noted that 24% of work orders sampled which had not been completed within timescales, were jobs which had gone through the approvals process.

Finding

Rating

High Priority

New start guidance and staff training

Management have advised that on-the-job training is provided for new starts a mentor is allocated, there is a MS Teams channel to answer queries, and there are regular team discussions on emerging issues. Written training documents were not available, other than the Council's role specific learning materials. Management have advised that the upcoming review will develop training documents for new staff.

In addition, a review of completion of <u>role specific learning</u> showed that not all staff had completed required training.

Risks

- Financial and Budget Management non-completion of repairs could result in financial losses
- **Regulatory and Legislative compliance** service may not meet regulatory and legislative requirements
- Reputational if the service does not operate efficiently, it could cause property closures and impact the wider community
- Health and Safety if repairs are not completed within timescales, they could cause a hazard to employees and service users
- Service Delivery Helpdesk service may not meet customer needs effectively, and in line with statutory requirements.

Recommendations and Management Action Plan: Procedures and Internal Training

| Ref. | Recommendation | Agreed Management Action | Action Owner / Lead Officers | Timeframe |
|------|---|---|---|------------|
| 1.1 | Corporate Property Helpdesk procedures should be documented, approved by senior management, and communicated to relevant colleagues. It is recommended they include: instruction for logging and allocating repairs, including who has reported the repair (this should link in with recommendation 2.3), the allocated contractor, priority rating, estimated costs, full and accurate repair details, contact information for the requester, a description of the issue and how to generate the help call when to phone a repair through and where to record that this has been completed how to manage repairs logged by the out of hours service how open jobs will be followed up, by whom, frequency and how this will be tracked and monitored how to manage and record updates, enquiries, or notes process for providing updates or changes to procedure to staff, e.g. toolbox talks. | Agreed. Corporate Property helpdesk will be going through a service review at which time processes and procedures will be developed and will incorporate all points in the recommendation. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/05/2025 |
| 1.2 | A proactive process for updating customers with open repair orders should be considered, whether this is through the CAFM system or manually, especially when a repair is past its target timescale. All communications should be recorded appropriately to provide an audit trail of the repair. | Agreed. Corporate Property helpdesk will be going through a service review at which time processes and procedures will be developed. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/05/2025 |
| 1.3 | The approvals process for repairs over £500 should be documented, it is recommended it includes: officers responsible frequency of email reminders | Agreed. Work with the Service Manager (Contract Manager) to agree SLA for approvals within the maintenance team. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/10/2024 |

| | timescales approvals should be completed or rejected in, and how to update the system accordingly how approvals are communicated to contractors where to record/store estimates. | Process to be developed and include the SLAs for approval. | | |
|-----|--|---|---|------------|
| 1.4 | Training documents should be developed to support staff training, and for future reference as needed. It is recommended these include: the procedures outlined in Recommendation 1.1 details of the role of their coach and who to contact for support a training matrix which is signed off when completed. In addition, managers should monitor completion of role specific learning, this should include regular review with officers at one to ones, regular review of completion reports on myLearning Hub and issue of reminders to staff as required. | Agreed. Corporate Property helpdesk will be going through a service review at which time processes and procedures will be developed and will incorporate all points in the recommendation. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/05/2025 |
| 1.5 | The information available to customers on the Council's intranet regarding corporate property repairs should be updated to include key information for customers, such as contact numbers (including out of hours), and a statement that repairs for Council buildings should be requested through the Helpdesk. This information should be periodically reviewed to ensure it is complete, accurate and up to date. | Agreed. Intranet details to be updated to cover current service along with OOH details for reference. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 30/04/2025 |

Finding 2 – Quality Assurance Processes

Quality assurance and sample checks

The contracts with the suppliers outline the requirements for both the contractors and the Council. They include the requirement that contractors ensure all performance and quality monitoring is managed, executed, and monitored through the contractors' FM service desks. It also requires the Council to carry out 10% sample testing and checking on repairs for the quality of work, and the accuracy of invoicing.

It is noted that the 10% sampling of contractors' work is not being performed. In addition, there is no documented internal process for performing these checks.

Escalation processes

For repairs which have not been completed within target timescales, or have been followed up by customers twice, there is an escalations process to follow. Customers were provided with informal details of the escalation process by email via the Service Operations Managers.

Audit testing, found the escalations process to be efficient overall with escalations being logged, tracked, and monitored regularly. Escalations can also be initiated following discussions between FM and service areas, but it was noted that these are not consistently logged and tracked. It was also noted the escalation process is not formally documented.

In addition, it was noted that the Helpdesk process is not proactive and instead reacts to queries received from customers, and there are currently no checks on task orders to determine if any have gone beyond their expected timescales.

Retention of repairs requests

Requests for repairs are raised either by telephone or email, with all relevant information then being input to CAFM. Due to the volume of emails received, emails older than 3 months old are routinely deleted. By not retaining emails for a longer period, there is a risk that there is no record of the repair request or evidence requests were logged on the system in a timely manner.

Risks

- Financial and Budget Management if repairs are not completed to standard, best value may not be achieved
- **Regulatory and Legislative compliance** if work is not completed in a timely manner, it may breach regulatory and legislative timeframes
- Supplier, Contractor and Partnership management the Council may not be achieving best value
- **Reputational Risk** customer satisfaction does not meet the Council's standards.

Recommendations and Management Action Plan: Quality Assurance Processes

| R | ef. Recommendation | Agreed Management Action | Action Owner / Lead Officers | Timeframe |
|----|---|--|---|------------|
| 2. | A quality assurance programme should be created to review the timeliness of completion, and quality of repairs carried out. A clear methodology which includes the following is recommended: sample size of orders to be reviewed (recommended minimum of 10%) | Agreed. Service Manager to develop a process for 10% checks and will incorporate all points in the recommendation. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 30/09/2024 |

| | frequency of reviews, timescale for completion and which officers should perform them where the results of inspections are recorded data quality checks to ensure accuracy of data input which officers and groups will receive the associated reporting on the results of quality assurance exercises lessons learned, training needs and any remedial work | | | |
|-----|--|---|---|------------|
| 2.2 | to be performed. The escalations process should be documented, it is recommended it includes: logging and monitoring of escalations how long customers have to wait before an issue can be escalated the use of a tracker, which is accessible to all relevant officers the requirement for communication with contractors and customers to be noted or stored electronically and accessible to relevant officers the requirement for weekly email reports on escalations to be stored electronically to provide an audit trail the requirement for meetings with contractors to have an agenda and be minuted, and frequency of meetings to be agreed detailed on how frequently customers should be informed of progress made to resolve issues. | Agreed. Escalations lead to provide the process and procedure for following up on an escalation. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/10/2024 |
| 2.3 | The procedure referred to in Finding 1 should also include direction on records retention, including how and where emails and telephone records relating to repairs are stored and how they are maintained, in line with the Council's records management requirements. Records should be stored electronically in appropriate locations/systems, which are accessible to relevant officers as required. | Agreed. Moving towards new process using Halo, this will be called MYPROPERTY and this will be facilitated by creating a form which will integrate with CAFM. All information relating to the original enquiry will be stored within the MYPROPERTY area. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/10/2024 |

Finding 3 – Performance Monitoring and Reporting

Following repairs being logged with the Corporate Property Helpdesk, they are allocated to one of two contractors: Mitie or Skanska. These contractors are managed through term service contracts. The Council's Contract and Grant Management (CAGM) team has established <u>contract management guidance</u> and a <u>Contract management manual and toolkit</u> which are available on the Orb to support effective management of suppliers.

There is currently no formal internal performance review process in place for contractors. Whilst 1 contractor provides a list of open jobs in their weekly email to escalations, open jobs are not proactively monitored by the Council. Audit review of the 8,711 orders created between 3 July 2023 and 29 December 2023 highlighted the following performance:

- jobs completed within target timescale 45%
- jobs completed outwith target timescale 52%
- jobs excluded from this calculation due to having incomplete information -3%.

| Priority | Completed within timescale | Not completed within timescale |
|----------|----------------------------|--------------------------------|
| Α | 31 | 70 |
| В | 671 | 609 |
| С | 1,457 | 2,142 |
| D | 1,783 | 1,737 |
| Total | 3,942 | 4,588 |

Table 1 below provides a breakdown of the 8,711 orders across the priorities:

From the jobs not completed within target timescales, 2,968 (65%) were more than double the target timescale.

Management of the contracts is performed through regular meetings with contractors, and the receipt of performance statistics. Previously, there was a dedicated officer in place to perform this work, but they moved to a new position within the Council in October 2023; however, the officer has continued to perform some elements of the work since they moved roles.

Although both contractors provide comprehensive monthly reports to the Council, management have stated that there is not enough resource to enable them to effectively manage the contractors.

Finding

Rating

High Priority

A review of contractor performance information provided to the Repairs and Maintenance Board (RMB) between September and December 2023 highlighted that the information provided by contractors is not standardised. Statistics provided by contractors and Council officers respectively to the RMB also differ slightly. For example, for November 2023:

Table 2

| | Mitie report | Council report | CAFM stats |
|---------------|----------------|----------------|------------|
| Tasks logged | 941 | 847 | 895 |
| Response rate | 95% | 91% | 93% |
| | Skanska report | Council report | CAFM stats |
| Tasks logged | 851 | 822 | 870 |
| Response rate | 84% | 84% | 82% |

Management are aware of these discrepancies in the reporting and have advised that they are working to resolve them.

Although the statistics provided to the RMB provide useful information on contractor performance, they do not include statistics on job completion within agreed timescales (see <u>table 1</u>). This reporting to the RMB started in September 2023, and management have advised that they intend to expand the KPI information from January 2024.

In addition, although areas of improvement are discussed at the RMB meetings, there is no recorded action plan to track improvements.

Data quality

Finally, Internal Audit performed an analysis of jobs created during the period July to December 2023, and noted instances of poor data quality: for example, response times sometimes being before creation times

Risks

- Financial and Budget Management contractors' breach of the contractually agreed KPI's do not provide best value to the Council, and inadequate performance monitoring leading to potential overspend
- Regulatory and Legislative compliance inadequate performance leading to potential breach of compliance
- Governance and Decision Making management are unaware of performance issues and make uninformed decisions
- Supplier, Contractor, and Partnership Management contractors potential non-compliance with the contractually agreed KPIs
- **Reputational –** delayed repairs do not meet the Council's standards and customers' expectations leading to complaints.

Recommendations and Management Action Plan: Performance Monitoring and Reporting

| Ref. | Recommendation | Agreed Management Action | Action Owner / Lead Officers | Timeframe |
|------|--|--|---|------------|
| 3.1 | Improvements for contractor performance monitoring and reporting should be implemented to ensure compliance with the Council's Contract Management guidance, manual and toolkit. It is recommended these include: | Agreed. Service Manager to assist with Automated reports from CAFM to provide the call volume, response and rectification, first time fixes, calls by category. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 30/10/2024 |
| | overall review and monitoring of contractors' performance against KPIs to ensure contractors are achieving the repair completion standards. | | | |
| | standardisation of reporting from contractors should be agreed. This should be formally recorded to enable effective senior management oversight and remedial actions to improvement performance, where required | | | |
| | reports should be shared with Committee where required | | | |
| | provision to reduce key person dependency such as allocation of a deputy contract manager. | | | |
| 3.2 | A process to monitor completion of repairs should be established, it is recommended it includes the following: a written performance review process | Agreed. Service Manager to review the process contained within the contract with a view to formalising details relevant to the recommendation. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/10/2024 |

| • | timescales | Volume 8 Key performance indicators | |
|---|---|-------------------------------------|--|
| • | ensuring a completion date is recorded in CAFM in a timely manner | | |
| • | ensuring 'rejections' of approvals are closed in CAFM | | |
| • | ensuring any inaccuracies in CAFM are rectified | | |
| • | completion of quality assurance processes outlined in <u>recommendation 2.1</u> to ensure repairs are completed adequately and to the required standard | | |
| • | a documented action plan when KPIs are not met, the action plan should have clear actions, timescales for completion and lead officers | | |
| • | data quality principles and checks to ensure accuracy of data input (see recommendation 2.1). | | |

Finding 4 – Risk Management

Risk management enables risk to council or service objectives to be identified, recorded, and managed. Effective risk management helps to provide assurance that objectives are achieved on an ongoing basis.

No risk register is currently in place for the Corporate Property Helpdesk or for the oversight of corporate property repairs. Management advised that no risk register for the process was provided during the handover of management of the service from Corporate Services to Place.

Risks

and managed at service level.

• Governance and Decision Making - risks are not effectively identified

Finding

Rating

Medium

Priority

Recommendations and Management Action Plan: Risk Management

| Ref. | Recommendation | Agreed Management Action | Action Owner / Lead Officers | Timeframe |
|------|--|---|---|------------|
| 4.1 | A review of risks related to the Corporate Property Helpdesk should be undertaken, and the risks identified should be recorded within the Facilities Management risk register. This should include the risks associated with the issues raised in this report. Risks should be regularly discussed with all relevant operational managers with mitigating actions agreed, recorded, and tracked as required. Review of risks should be embedded into regular team meetings to increase risk management awareness, with support sought from the Council's <u>Corporate Risk Management team</u> , if required. | Agreed. Integrate CPHD within wider FM risk register process. | Owner: Executive Director - Place Directorate Lead Officers: Technical Service Manager | 31/08/2024 |

Appendix 1 – Control Assessment and Assurance Definitions

| Control Assessment Rating | | Control Design Adequacy | Control Operation Effectiveness |
|--|--|--|---|
| Well managed | | Well-structured design efficiently achieves fit-for purpose control objectives | Controls consistently applied and operating at optimum level of effectiveness. |
| Generally Satisfactory Sound design achieves control objectives | | Sound design achieves control objectives | Controls consistently applied |
| Some Improvement Opportunity | | Design is generally sound, with some opportunity to introduce control improvements | Conformance generally sound, with some opportunity to enhance level of conformance |
| Major Improvement Opportunity | | Design is not optimum and may put control objectives at risk | Non-conformance may put control objectives at risk |
| Control Not Tested N/A | | Not applicable for control design assessments | Control not tested, either due to ineffective design or due to design only audit |

| Finding Priority Ratings | |
|--------------------------|---|
| Advisory | A finding that does not have a risk impact but has been raised to highlight areas of inefficiencies or good practice. |
| Low Priority | An issue that results in a small impact to the achievement of objectives in the area audited. |
| Medium Priority | An issue that results in a moderate impact to the achievement of objectives in the area audited. |
| High Priority | An issue that results in a severe impact to the achievement of objectives in the area audited. The issue should be resolved as a priority. |
| Critical Priority | An issue that results in a critical impact to the achievement of objectives in the area audited. The issue needs to be resolved as a matter of urgency. |

Appendix 2 – Audit Areas and Control Objectives

| Audit Area | Control Objectives |
|-------------------------------------|---|
| Processes, procedures, and training | Procedures are in place which clearly set out the processes for the effective management of corporate property reactive repairs, to help ensure that repairs are completed on time and to the required standard. |
| | All relevant staff receive regular training on operation of the procedures. |
| Logging and allocation of repairs | All requests for repairs are logged on the system, which include full and accurate details, for example contact information, a detailed description of the issue, and the associated priority rating. |
| | Requests are allocated to an appropriate contractor in line with priority categorisation. |
| | Contractors record all relevant repair information on the system in a complete and timely manner. |
| Quality assurance | There is regular monitoring to ensure that all requests are completed within agreed timescales (based on their priority ratings), and to the required quality. |
| | Issues with repair timeliness or quality are escalated and appropriate action taken to resolve issues. |
| | Internal customers who request repairs are provided with accurate, real-time information on the status of the repairs. |
| Oversight and governance | Key performance indicators (KPIs) to monitor service delivery have been established and complete, accurate, and timely performance information is reported to an appropriate governance level to ensure compliance with KPIs. |
| | Performance is reviewed regularly to ensure thematic issues and areas for improvement are identified and corrective action taken, and lessons learned implemented. |
| Risk Management | Risks related to the Corporate Property Helpdesk are identified, recorded, and managed within a service risk register, and regularly reviewed to ensure appropriate mitigating actions are in place and remain effective, with escalation to divisional and directorate level risk committees where required. |