APPENDIX 3: ACTION PLAN RE HOUSING BENEFIT RISK ASSESSMENT

| | RISK | | ACTION REQUIRED | ADDITIONAL | | |
|-----|---|-----------------|-----------------|------------------|--|----------------------|
| NO. | NARRATIVE | | NSIBLE | DATE | | COMMENT |
| | | Lead Officer | Partner | | | |
| 1 | Although the council has a comprehensive performance reporting framework, there is limited reporting to senior management in respect of overpayment recovery and appeals and requests for reconsideration performance. This is particularly important in respect of appeals as this work is outsourced and performance is below expectations. | | MC | 26 June 2014 | Revenues and Benefits Manager to include performance in Reconsiderations and Overpayment recovery in monthly highlight report for Financial Services Management Team. Performance in Appeals to be reported Quarterly to this meeting. | Already completed |
| 2 | The HB Overpayment Recovery/Debt Collection policy 2011 needs to be updated to reflect the council's current approach to the recovery of benefit debt, and to ensure that customers are being treated in a fair and equitable manner. | | MC/SL | 31 December 2014 | HB overpayment recovery policy to be updated by 18 November 2014 and presented to Policy and Resources committee 18 December 2014 so that changes can be implemented for 2015/2016 year. | |
| 3 | The council needs to update the SLA 2012/13 between the Revenues and Benefits service and the CSC to reflect current working practices, review and update targets as appropriate, and re-introduce the formal meetings of the Operational Working Group and the Benefit Review Group to comply with the SLA governance arrangements. | FW | MC/MT /MR/JG | 31 August 2014 | SLA meeting held 17/7/14 and SLA agreement redrafted, still to be signed off. Operational Working Group meeting held 9/7/14 and terms of reference agreed. | In progress |

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|-----|--|-----------------|------------------------|------------------|--|----------------------|
| NO. | NARRATIVE | | NSIBLE Partner s | DATE | | COMMENT |
| | The level of evidence being requested by CSC staff at point of contact is insufficient to enable the benefit service to process claims without requesting further information which is causing delays, and is having a detrimental effect on claim processing times. | MC | RB/SS | | at supervisory level. Issues logged and a formal report raised quarterly to CSC SLA meeting where details are discussed and actions taken to mitigate issues. | Already completed |
| | The council needs to address the reasons why it has failed to meet its financial accuracy target of 95% since 2010/11. The council needs to address the reasons why it has met its non-financial accuracy target of 70% in only five of the last 33 months. | MC | RB/SS | 31 December 2014 | Team day hosted to discuss accuracy and requirement to maintain focus on accuracy. Workshop sessions held highlighting problem areas and lessons learned. New procedure to be developed by 30 September for QA checks with a target of undertaking at least 80 checks per month. It will ensure that checks on staff undergoing training will be split out from the general QA checks that related to this accuracy PI. Will also review accuracy levels nationally to ensure that 70%/95% accuracy targets are reasonable. This will inform the new procedure. Expect the team to meet the revised targets by 31 December 2014. | |

| | RISK | | | | ACTION REQUIRED | ADDITIONAL |
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| NO. | NARRATIVE | | NSIBLE Partner s | DATE | | COMMENT |
| 7 | In order to ensure that resources are being used to best effect, and to help inform future intervention strategies, the council should link its intervention outcomes to the value of overpayments/underpayments identified. | FW | MC | 31 March 2015 | Intervention strategy for 2014/2015 agreed and actions being carried out. Interventions being recorded electronically and will be attributed a value in terms of overpayments /underpayments identified. This will allow analysis of the overall value of the exercise to inform future strategy. New strategy to be drafted in January 2015 ready for SMT approval in March 2015. | |
| 8 | Since 2010/11, the council has not met any of its internal targets for dealing with requests for reconsideration or for submitting appeals to the Tribunals Service. | FW | MC | 31 March 2015 | Quarterly meeting to be held with external service provider and performance evaluated in line with targets. If there is no improvement by the end of quarter 2 - 30 September 2014 - then we will consider retendering the service. Any new service to be in place by March 2015. | |
| 9 | Requests for reconsideration are carried out by the same benefit assistant that carried out the original assessment and therefore there is limited assurance that when a decision is revised in favour of the customer, that errors made are being recorded properly, or that appropriate remedial action is being taken. | FW | MC | 30 September 2014 | 75% of current reconsiderations relate cases where customer provides additional information. These will be removed from the statistics in the future. We will QA 10% of the remaining reconsiderations to ensure that all processing errors are picked up. | |

| | RISK | ACTION REQUIRED | ADDITIONAL | | | |
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| NO. | NARRATIVE | RESPONSIBLE | | DATE | | COMMENT |
| | | Lead | Partner | | | |
| | | Officer | S | | | |
| 10 | The council needs to carry out detailed analysis of its | FW | MC | 31 January 2015 | The QA checks in 9 above will be | |
| | request for reconsideration data to establish the | | | | analysed quarterly. Reports on Q3 stats | |
| | reasons why customers are not providing the | | | | for quarter ending 31 December 2014 to | |
| | requested information, or where a processing error | | | | be completed by 31 January 2015 and | |
| | has been identified to ensure that it is properly | | | | thereafter will inform the training | |
| | recorded as part of the council's QA process. | | | | provided by the training officer. | |
| 11 | The council needs to address the reasons for the | FW | EML | 31 December 2014 | New Fraud Risk Matrix to be devised | |
| | declining trend in the percentage of successful | | | | which assists the Fraud team in | |
| | sanctions arising from investigations. | | | | prioritising caseload. This will improve | |
| | | | | | the quality of the cases investigated and | |
| | | | | | include new RTI cases. | |