

<b>SUBJECT:</b>	<b>CALL IN – MY MATES</b>
<b>MEETING:</b>	<b>GOVERNANCE &amp; AUDIT COMMITTEE</b>
<b>DATE:</b>	<b>OCTOBER 2025</b>
<b>DIVISION/WARDS AFFECTED:</b>	<b>ALL</b>

## **1. PURPOSE:**

- 1.1 At the September 2025 Governance & Audit Committee meeting it was resolved to request that the appropriate senior manager(s) attend a future meeting to discuss the findings from the My Mates Internal Audit report which received an unfavourable opinion.

## **2. RECOMMENDATIONS:**

- 2.1 That Members of the Governance and Audit Committee accept the explanations and assurances of the senior manager(s) which will be confirmed by the follow up internal audit review. Or,
- 2.2 Don't accept the explanations and escalate their concerns to the Chief Executive.

## **3. KEY ISSUES:**

- 3.1 During the Governance & Audit Committee meeting on the 11<sup>th</sup> September 2025 and within the 2025/26 Quarter 1 update report, the Chief Internal Auditor brought to the Committees attention that an unfavourable opinion (Limited Assurance) had been issued for the planned Internal Audit review of the My Mates Service.
- 3.2 Following consideration of the findings, the Committee requested the attendance of a relevant senior officer at the next meeting to discuss how the situation has arisen and what was being done to address the deficiencies with a view to providing the required level of assurance that matters are being dealt with.

## **4. REASONS:**

- 4.1 As part of the 2024/25 Internal Audit plan a review of the My Mates Service was agreed. The audit review commenced in February 2025 and had the scope to objectively examine and evaluate the financial, administrative and safeguarding controls along with the effectiveness of the Monmouthshire County Council governance framework operating within the My Mates service using a risk-based approach. In particular the review would examine that;
  1. The My Mates service adheres to governance and compliance standards, including data protection and safeguarding procedures.

2. An eligibility criteria is consistently applied, and new members receive advice and guidance from the My Mates team.
3. The My Mates budget is monitored. All funding and income is collected, banked, recorded promptly and reconciled.
4. The payment of salaries and wages, including allowances and expenses is subject to appropriate controls.

- 4.2 Shortly after the audit fieldwork commenced, the My Mates Manager began a period of absence. Due to this, it was agreed to delay the review until later in quarter 1 of the 2025/26 financial year to allow time for them to return to work and for the audit team to seek full explanations. Despite this, the absence continued past the date of issuing both the draft and final report, therefore, some of the issues contained within the report could not be fully discussed during the audit and findings were derived from documents either provided by the team or located by the auditor on the My Mates SharePoint area.
- 4.3 The conclusion of the review was that there was 'Limited Assurance' and that significant gaps, weaknesses or non-compliance were identified.
- 4.4 The finalisation of the report and the Agreed Management Actions were completed with the support of the Service Manager, All Age Disability And Mental Health and the Head of Adult Services.
- 4.5 Appendix A shows a summary of the issues raised within the Internal Audit Report, the Recommendations and the Agreed Management Actions.
- 4.6 Members of the Governance and Audit Committee requested in the September 2025 meeting that the respective senior officer(s) of the My Mates Service be invited to the Governance and Audit Committee to:
  1. Explain why there was a weakness in control.
  2. Provide assurances on the progress of the implementation of the audit recommendations in order to demonstrate an improvement in the control environment.
- 4.7 It is the Internal Audit team's intention to complete a Follow-Up review of the My Mates service during the 2026/27 financial year. The outcome of this will be reported to the Committee in due course.

## **5. RESOURCE IMPLICATIONS:**

None

## **6. CONSULTEES:**

Deputy Chief Executive & Strategic Director – Resources (S151 Officer)  
Strategic Director – Social Care & Safeguarding  
Head of Adult Services  
Service Manager - All Age Disability And Mental Health

**7. BACKGROUND PAPERS:**

None

**8. AUTHOR AND CONTACT DETAILS**

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Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
	No critical weaknesses were identified during this audit.			
1.05	There were missing member application forms and related supporting information. Several member folders were empty.	<p><b>Recommendation:</b> Conduct a thorough review of data management practices and ensure all member information is securely stored and backed up.</p> <p>Ensure automatic retention periods on folders are correctly set.</p> <p>Report and assess the potential data breach promptly.</p> <p><b>Agreed Management Action:</b> All new membership forms now have a digital solution – form on Phone/tablet which goes straight onto Sharepoint files.</p> <p>We will ensure that automatic retention periods on folders are correctly set. The loss of data will be reported to the Information Governance team.</p>	All Age Disability and Mental Health Service Manager	October 2025

Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
1.06	For the sample of activities selected, a risk assessment could not be located.	<p><b>Recommendation:</b> Ensure that risk assessments are conducted for all activities and are readily accessible for review.</p> <p><b>Agreed Management Action:</b> Risk Assessments to be completed for all activities.</p> <p>Lone working to be reconsidered for the future of the service. For the immediate future lone working has been stopped.</p> <p>A reference is required for all members prior to commencement of membership to determine risks and appropriateness of membership. This will form part of the risk assessment.</p>	All Age Disability and Mental Health Service Manager	October 2025
1.07	The Safeguarding Audit Framework for Evaluation (SAFE) had not been undertaken for the My Mates service.	<p><b>Recommendation:</b> Implement regular SAFE audits for the My Mates service to ensure compliance with safeguarding policies.</p> <p><b>Agreed Management Action:</b> CLDT SAFE to be updated to incorporate My Mates service.</p> <p>File to be added to SharePoint so that all DTRs can be stored, regardless of which authority.</p>	All Age Disability and Mental Health Service Manager	September 2025

Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
1.08	All mandatory training classed as “Essential Learning” had not been completed by the team on the Thinqi system.	<p><b>Recommendation:</b> Instruct staff to complete mandatory training. Establish a timeframe and ensure that all staff have completed the required courses.</p> <p>Agreed Management Action: Team to be informed and told to update training.</p>	All Age Disability and Mental Health Service Manager	October 2025
1.09	Staff observations of incidents or problematic behaviours were not consistently retained. There was no framework over how to record, retain and disseminate this information to relevant parties.	<p><b>Recommendation:</b> Have a guidance note for staff regarding what information should be recorded in regards to behaviours, incidents or disclosures and how that is passed on to relevant departments when required.</p> <p><b>Agreed Management Action:</b> The team contact the relevant Social work team and share info.</p> <p>File to be added to SharePoint so that all DTRs can be stored, regardless of which authority.</p> <p>To be discussed in supervision and appropriate action taken were necessary.</p>	All Age Disability and Mental Health Service Manager	October 2025

Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
2.06	The My Mates service was marketed as a 'dating' platform on application forms.	<p><b>Recommendation:</b> Update application forms to accurately reflect the current focus of the My Mates service.</p> <p><b>Agreed Management Action:</b> The service was initially set up for dating and friendships. Morphed in to friendship and was a move away from statutory services.</p> <p>Form has already been changed with the digital team.</p>	All Age Disability and Mental Health Service Manager	September 2025

Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
2.07	There was no formal written eligibility criteria available for those accessing the service.	<p><b>Recommendation:</b> Formally agree and document a criteria for those using the service, including where existing members may continue to use the service if they no longer meet the new criteria.</p> <p><b>Agreed Management Action:</b> Model being looked at with a view to amending. The eligibility criteria will be documented as part of this.</p> <p>Monmouthshire now has MSS who work with people with autism. The All Age Disability and Mental Health Service Manager to check with other authorities what services they have for people with autism.</p> <p>All new referrals to be cross referenced against WCCIS to determine eligibility. – With consent from individual (gained from application form).</p>	All Age Disability and Mental Health Service Manager	November 2025
3.04	RIF / ICF grant funding was not meeting the costs of running the My Mates service.	<p><b>Recommendation:</b> Representation should be made to the Gwent Regional Board to request the funding model is reconsidered to ensure it meets the actual costs of running the service.</p> <p><b>Agreed Management Action:</b> Discussed with Gwent Heads of Service on 8t August 2025. Agreed to look at model of service, type of activities undertaken and expenses claims.</p>	All Age Disability and Mental Health Service Manager	October 2025



Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
3.05	My Mates was a cash-based service and did not provide alternative methods of payment to members such as online payment or Chip&Pin. Sometimes, staff held cash temporarily prior to banking.	<p><b>Recommendation:</b> Reduce or eliminate the use of cash.</p> <p>Implement online payment options and handheld devices to reduce reliance on cash transactions and enhance security.</p> <p><b>Agreed Management Action:</b> We will explore the ability for bank transfers and Chip and Pin devices to make payment. We will then encourage members to make payment this way.</p>	All Age Disability and Mental Health Service Manager	November 2025
3.06	Banking was not always undertaken in a timely manner.	<p><b>Recommendation:</b> Ensure that banking is undertaken promptly.</p> <p><b>Agreed Management Action:</b> See response above which significantly reduces the need to handle case and bank money.</p> <p>In the meantime, staff will be reminded to bank money as soon as possible following receipt.</p>	All Age Disability and Mental Health Service Manager	October 2025
4.03	Staff were not recognised as permanent employees and there was no evidence of justification for the on-going temporary employee status.	<p><b>Recommendation:</b> Review and update employment contracts to ensure staff are recognised as permanent employees where applicable.</p> <p><b>Agreed Management Action:</b> Employees will be given permanent contracts from 1<sup>st</sup> October 2025</p>	All Age Disability and Mental Health Service Manager	October 2025

Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
4.04	Subsistence claimed via Payroll was not claimed in line with the HMRC approved rate. Guidance drafted April 2024 within the Team did not provide rates applicable and did not appear to be finalised with HR.	<p><b>Recommendation:</b> Ensure subsistence claims are in line with HMRC rates.</p> <p>Finalise team guidance documents with HR and SCH Finance with regards to treatment of costs of attending My Mates events</p> <p><b>Agreed Management Action:</b> From week commencing 8<sup>th</sup> Sept 2025 up to £5 only will be paid for meal costs. It was recognised that this will impact on service delivery and will be looked at as part of the service remodelling.</p> <p>There may be extremely exception circumstances (e.g. Christmas party) where the cost will need to be discussed and agreed at senior management level.</p>	All Age Disability and Mental Health Service Manager	September 2025

Ref.	Weakness	Recommendation & Agreed Management Action	By Who	By When
4.05	The taking of enhanced time off in lieu (TOIL) was inconsistent with MCC's employment guidance around taking of overtime. TOIL and flexi time records were not always kept separately, and TOIL did not account for a mandatory 30-minute break after 6 hours of work.	<p><b>Recommendation:</b> Consult with HR with regards to enhanced time off in lieu (TOIL).</p> <p>Ensure TOIL and flexi time records are kept separately and account for mandatory breaks to comply with employment law.</p> <p><b>Agreed Management Action:</b> The team have been advised that MCC does not operate TOIL. They will fill out just their flexi sheets in future.</p> <p>Weekend working has been stopped temporarily whilst we relook at the model of the service.</p>	All Age Disability and Mental Health Service Manager	September 2025

Ref.	MODERATE
1.10	<p>The business case for the original pilot of My Mates and subsequent roll of the service was missing.</p> <p>Since the first presentation regarding the service to the Adults Select Committee in December 2016, no progress to date has been formally reported back to Members.</p>
1.11	<p>Internal performance reporting does not provide sufficient coverage of the My Mates service.</p>
1.12	<p>The MS Forms application form database did not contain a number of key consent fields and reference contact information was also missing. Errors in age calculations existed and incorrect start dates for members were recorded.</p>
1.13	<p>The My Mates application form incorrectly stated that members' information would only be shared with My Mates staff.</p>
2.08	<p>WhatsApp was used for colleague-to-colleague communications.</p>
2.09	<p>Dealing with members can extend beyond working hours.</p>
3.07	<p>MCC official receipt books were not used to record income received.</p>
3.08	<p>The cost of staff attending events was not recorded within the ICF/RIF return.</p>
3.09	<p>Audit could not locate the supporting paperwork for the S128 £3,835.02 accrual at the end of the 2023/24 financial year.</p>
4.06	<p>Appointment letters and job descriptions were inaccurate and did not align with the rota or weekend working arrangements for a team member. Additionally, the compressed hours arrangements within the team were not documented in the employee's HR file.</p>
4.07	<p>Although copies of employees driving licences and MOT certificates were retained, only two of the three motor insurance certificates were available. Additionally, there was no summary record confirming that the manager conducted annual checks.</p>