

# **Public report**

Report to	
Audit and Procurement Committee	21 <sup>st</sup> October 2013
Name of Cabinet Member: Cabinet Member (Strategic Finance & Resources) – Councillor Gannon	
Director approving submission of the report: Executive Director, Resources	
Ward(s) affected: City Wide	
Title: Internal Audit Recommendation Tracking Report	
s this a key decision? No	

#### **Executive summary:**

The purpose of this report is to provide the Audit and Procurement Committee with an update on the progress made in implementing audit recommendations since the last update in October 2012.

#### Recommendations:

Audit and Procurement Committee is recommended to:

- 1. Note the current procedure for following up audit recommendations and to consider whether it believes that improvements are required to the current process.
- 2. Note the progress made in implementing audit recommendations and confirm its satisfaction with progress made and the proposed action by the Internal Audit and Risk Manager for audits where actions remain outstanding.

#### **List of Appendices included:**

**Appendix One** - Results of Formal Follow up Exercise **Appendix Two** - Results of Self-Assessment Follow up Exercise

Other useful background papers:

None

Has it or will it be considered by scrutiny?

No other scrutiny consideration other than the Audit and Procurement Committee

Has it, or will it be considered by any other council committee, advisory panel or other body?

No

Will this report go to Council?

No

#### Report title:

Internal Audit Recommendation Tracking Report

#### 1. Context (or background)

- 1.1 The Public Sector Internal Audit Standards requires that "the Chief Audit Executive (i.e. Internal Audit and Risk Manager) must establish a follow up process to monitor and ensure that management actions have been effectively implemented or that senior management have accepted the risk of not taking action".
- 1.2 The report summarises the results of this work and is presented in order for the Audit and Procurement Committee to discharge its responsibility, as reflected in its terms of reference "to consider a report from the Head of Internal Audit regarding recommendations contained in Internal Audit reports that have not been implemented within agreed timescales".

#### 2. Options considered and recommended proposal

2.1 **Follow Up Procedure** – Given that the Service undertakes approximately 100 reviews a year, it is critical that it has a robust procedure in place for ensuring that it obtains appropriate assurance that audit recommendations have been implemented, but does so in a way that allows the Service to respond to new risks facing the Council. Where appropriate, Internal Audit defines within its audit reports the follow up process to those responsible for the system / area under review and a date is agreed of when a follow up will take place.

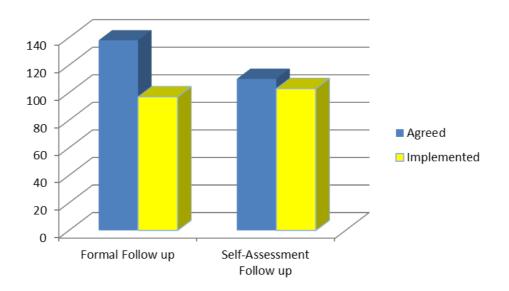
Currently, there are three key considerations that will determine the follow up procedure adopted, namely:

- 1) Whether the area audited is of such significance that it is subject to an annual review.
- 2) The level of assurance provided in the audit report.
- 3) A 'catch all' process for those reviews where neither of the points above apply, but a follow up review is necessary.
- 2.2 These considerations are expanded upon below.
  - Annual Audits: These audits are generally included in the Audit Plan on an annual basis because of the nature of the systems, and the fact they are corporate wide and have been identified as key in delivering the Council's objectives (e.g. financial systems, corporate risks).
  - Level of Assurance: Any audit which receives 'no' or 'limited' assurance (see definitions overleaf) is subject to a follow up review to assess improvements based on a timing agreed between Internal Audit and relevant management. In either of these circumstances, a formal follow up review will take place which involves Internal Audit assessing progress through audit testing to ensure that agreed actions have been implemented and are working effectively.

Assurance Opinion	Definition
Limited	There are weaknesses in the level of control for managing the significant inherent risks within the system. A number of control failings have been identified from the systems evaluation and testing. These failings show that the system is clearly at risk of not being able to meet its objectives and significant improvements are required to improve the adequacy and effectiveness of control.
No	There are major, fundamental weaknesses in the level of control for managing the significant inherent risks within the system. The weaknesses identified from the systems evaluation and testing are such that the system is open to substantial and significant error or abuse and is not capable of meeting its objectives.

- Catch All Process: For all other audits, a process exists which is based on a self-assessment by relevant managers. This involves Internal Audit asking managers for an update on the action taken to implement audit recommendations. The response provided by managers is not subject to any independent validation by Internal Audit.
- 2.3 The follow up procedure was last reviewed in October 2012 and incorporated the views of the Audit Committee in place at the time. Overall, we still believe that the procedure achieves the right balance between ensuring action is taken in response to risks identified by Internal Audit and allowing the Service to focus on identification of new risks. This is particularly important given the reductions in the size of the audit team over the last few years which have resulted in an Audit Plan of 1,230 days for 2013-14.
- 2.4 **Results** The results of the latest follow up exercise are attached at Appendix One and Two and are summarised in the graph below.

Chart One: Analysis of Actions Implemented by Follow Up Method



Of the 248 actions followed up, 81% have been implemented based on both the formal and self-assessment follow up method. When this is analysed by follow up method the results are:

- Formal follow up method 70% implementation rate.
- Self-assessment follow up method 94% implementation rate.

Whilst there is a clear difference in results between the follow up methods, this is due, in our opinion, to one of the following reasons:

- In terms of the formal follow up, the audit process is rigorous, consisting of an assessment of the implementation of the action and the outcome achieved.
- The types of actions followed up through the self-assessment process are likely to be more straightforward, less time consuming for management to implement, and tend to focus on compliance rather than control issues.

In terms of the specific results, the following points should be considered:

- Formal follow up The implementation rate of 70% is around the average over the last three years, with previous rates being 77% in 2011 and 66% in 2012. It is difficult to reach any specific conclusions on the implementation rate, although the results at Appendix One do show that progress has been made in responding to audit concerns across the majority of audits followed up through this mechanism. It is also worth noting that some of the actions outstanding are dependant of IT system developments, which in our experience can be subject to delays. In these cases, the actions are being implemented, but the deadline date has had to be extended to reflect factors that have arisen since the original implementation date was agreed.
- Self-assessment The implementation rate of 94% remains high but again is similar to the previous two years (i.e. 98% in 2011 and 90% in 2012). This does continue to question the value of asking managers to self-assess whether they have implemented audit recommendations. However, our view remains that without such a mechanism for following up recommendations in reviews where the conclusion is that the systems are generally working well, the value of the audit process would be diminished.
- 2.5 **Proposed Way Forward for Dealing with Outstanding Actions** After the follow up is completed, the results are collated within Internal Audit. If progress is not consistent with expectations, audit management will determine the next course of action.

Based on the reasons for the lack of progress, the following courses of action are available:

- Revised implementation dates are agreed for outstanding actions.
- Concerns raised through the management structure to ensure senior managers are aware of both the lack of progress made and the risks still facing a service.
- As a last resort, to ask the Audit and Procurement Committee to intervene and seek prompt action from the relevant manager.

Our proposed actions for the audits where recommendations remain outstanding are:

- Where there is a formal audit is planned in 2013-14, the remaining actions will be considered as part of that review.
- Where there are only one or two actions outstanding, and we feel that the risks associated with the system / area reviewed are low, the outstanding actions will be followed up when the area is next reviewed.

#### 3. Results of consultation undertaken

3.1 None

#### 4. Timetable for implementing this decision

4.1 There is no implementation timetable as this is a monitoring report.

#### 5. Comments from Executive Director Resources

#### 5.1 Financial Implications

There are no specific financial implications associated with this report. Internal audit work has clear and direct effects, through the recommendations made, to help improve value for money obtained, the probity and propriety of financial administration, and / or the management of operational risks.

#### 5.2 Legal implications

There are no legal implications associated with this report.

#### 6. Other implications

# 6.1 How will this contribute to achievement of the council's key objectives / corporate priorities (corporate plan/scorecard) / organisational blueprint / LAA (or Coventry SCS)?

Internal Audit is defined as "an assurance function that provides an independent and objective opinion to the organisation on the control environment by evaluating its effectiveness in achieving the organisation's objectives. It objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources". As such the work of Internal Audit is directly linked to the Council's key objectives / priorities with specific focus agreed on an annual basis, and reflected in the annual Internal Audit Plan.

#### 6.2 How is risk being managed?

In terms of risk management, there are two focuses:

- Internal Audit and Risk Service perspective The main risks facing the Service are that the planned programme of audits is not completed, and that the quality of audit reviews fails to meet customer expectations. Both these risks are managed through defined processes (i.e. planning and quality assurance) within the Service with the outcomes included in reports to the Audit and Procurement Committee.
- Wider Council perspective The key risk that exists is that actions agreed in individual audits to improve the control environment, and assist the Council in achieving its

objectives, are not implemented. To mitigate against this risk, a defined process exists within the Service to gain assurance that all actions agreed have been implemented on a timely basis. Such assurance is reflected in reports to the Audit and Procurement Committee. Where progress has not been made, further action is agreed and overseen by the Audit and Procurement Committee to ensure prompt action is taken.

#### 6.3 What is the impact on the organisation?

None

#### 6.4 Equalities / EIA

None

#### 6.5 Implications for (or impact on) the environment

No impact

#### 6.6 Implications for partner organisations?

None

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## Appendix One – Results of Formal Follow up Exercise

Audit Review	High Risk Actions Agreed	High Risk Actions Implemented	Medium Risk Actions Agreed	Medium Risk Actions Implemented	Comments
CLYP Legal Costs			4	1	Follow up planned October 2013
Car Park Income	1	1	10	6	
Home Support Short Term Services	5	5	12	8	Reported to Audit Committee – Feb 13. Outstanding actions followed up through self-assessment at Appendix Two.
Payroll			1	0	Subject to annual audit review.
Income and Debtors	2	1			Subject to annual audit review.
Council Tax			3	2	Subject to annual audit review.
Purchasing Cards			4	3	
Creditor Payments			5	1	Reported to Audit and Procurement (A&P) Committee – Jul 13. Developments linked to new financial system.
Care Director (Expenditure)	4	3	5	3	Reported to A&P Committee – Aug 13. Subject to annual audit review.
Housing Benefits Overpayments	5	4	5	3	Reported to A&P Committee – Aug 13
Network Security	7	4	15	10	Reported to A&P Committee – Oct 13
Coundon Centre Financial Procedures			9	8	Reported to A&P Committee – Oct 13
Reed Recruitment Agency - Contract Monitoring	11	10	4	3	Reported to A&P Committee – Aug 13
Complaints	2	2	7	6	Reported to A&P Committee – Aug 13
Stanton Bridge	1	1	7	3	
Safeguarding Adults			4	3	
Elm Bank Financial Procedures			6	6	Reported to A&P Committee – Oct 13

Unless stated otherwise – any outstanding actions will now be followed up through self-assessment process

## Appendix Two – Results of Self-Assessment Follow up Exercise

Audit Review	High Risk Actions	High Risk Actions	Medium Risk Actions	Medium Risk Actions	Comments
	Agreed	Implemented	Agreed	Implemented	
St Thomas More	3		4	4	
Cannon Park			1	1	
Cardinal Wiseman			3	3	
St Johns			2	2	
Whoberley Hall			5	5	
Cash Collection - Adult Education	1	1	6	6	
Spon Gate			3	3	
Southfields			4	4	
Barrs Hill			3	3	
John Shelton			5	5	
Keresley Grange			4	4	
Freedom of Information			5	5	
Longford Park			11	11	
St Patricks			5	5	
Sir Frank Whittle			1	1	
Follow up - Job Descriptions			1	1	
Castle Wood			6	6	
Tiverton			5	5	
Three Spires			3	3	
Capital Programme - Highways			2	2	
Gosford Park			1	1	
Southfields			4	3	
Whitley Depot – Archive Clearance			4	3	
Sacred Heart			5	4	
Data Quality	2	2	5	2	
St Mary's Guildhall			1	-	
Purchasing Cards			4	4	
Home Support Short Term Service Team			4	4	

Unless stated otherwise – Outstanding actions will be followed up in next review