

Public report

Report to

Audit and Procurement Committee

16th March 2020

Name of Cabinet Member:

Cabinet Member for Policy and Leadership – Councillor G Duggins

Director approving submission of the report:

Deputy Chief Executive (Place)

Ward(s) affected:

City Wide

Title:

Internal Audit Recommendation Tracking Report

Is 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 internal audit recommendations since the last update in March 2019.

Recommendation:

The Audit and Procurement Committee is recommended to note the progress made in implementing audit recommendations and confirm its satisfaction with this and the proposed action by the Chief Internal Auditor 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

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. Chief Internal Auditor) 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 As reflected within its terms of reference, the Audit and Procurement Committee is required to receive reports on Internal Audit's follow up process. This report provides an update as to progress in respect of the agreed management actions which have been followed up during the period March 2019 to February 2020.

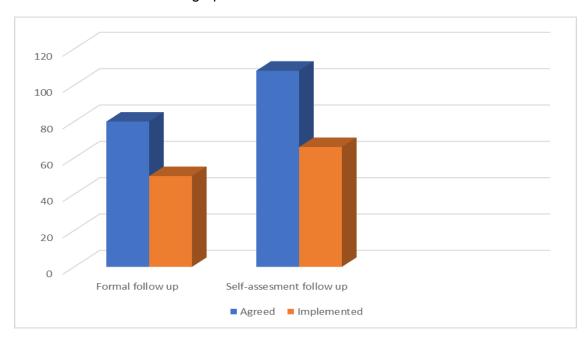
2. Options considered and recommended proposal

2.1 Follow Up Procedure - Given the number of audits that the Internal Audit Service completes every 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 this 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 self-assessment 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, risk management).
 - Level of Assurance: Any audit which receives 'no' or 'limited' assurance 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.
 - **Self-Assessment 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.

- 2.3 Overall, it is believed 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.
- 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.



Of the 188 actions followed up, 62% 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 63% implementation rate.
- Self-assessment follow up method 61% implementation rate.

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

- Formal follow up The implementation rate of 63% is comparable with results achieved over the last three years where implementation rates ranged from 57% to 71%. It is difficult to reach any specific conclusions on the implementation rate, although it should be pointed out that this does not mean that the recommendations outstanding are not subsequently implemented as revised implementation dates are agreed for all outstanding actions.
- Self-assessment The implementation rate of 61% reflects a reduction when compared to the last three years where reported implementation rates ranged from 70% to 98%. Whilst there may be a number of factors which have contributed to this, it is worth pointing out that the introduction of a new template form to assist managers to undertake the self-assessment and face to face meetings held in some cases may have assisted managers to reach more appropriate conclusions on the level of progress made. Given that the current rate of implementation is comparable to that of the formal follow up method, it is our view that the self-assessment process is fit for purpose at the current time.

- 2.5 No validation checks have been undertaken on self-assessment responses in 2019-20 due to other priorities within the Internal Audit Service. However, given the reported rate of implementation, this is not considered a significant risk at the current time and this option remains available to Internal Audit in the future as a mechanism to provide assurance over the self-assessment process.
- 2.6 **Proposed Way Forward for Dealing with Outstanding Actions** After the follow up has been 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 highlighted within Appendices One and Two.

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 the Director of Finance and Corporate Services

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

Reporting on progress in implementing audit recommendations ensures that the Council meets its statutory obligations in respect of maintaining an effective internal audit function and represents good governance.

6. Other implications

6.1 How will this contribute to achievement of the Council Plan?

Internal Auditing is defined in the Public Sector Internal Audit Standards as "an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes". 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 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 is that actions agreed in audit reports to improve
 the control environment and assist the Council in achieving its objectives are not
 implemented. To mitigate 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 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) Climate Change and the environment

No impact

6.6 Implications for partner organisations?

None

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Councillor G Duggins	Cabinet Member for Policy and Leadership	-	23/2/20	23/2/20

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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
Council Tax			5	4	This includes the results of formal follow up exercises undertaken from both the 2018/19 audit and the 2019/20 audit.
Business Rates	4	3	13	11	This includes the results of formal follow up exercises undertaken from both the 2018/19 audit and the 2019/20 audit.
Housing Benefits	1	1	1	1	
CareDirector (Expenditure and Income)	10	6	6	3	This includes the results of formal follow up exercises undertaken from both the 2018/19 audit and the 2019/20 audit.
Risk Management			4	0	Progress has been delayed due to changing in staffing. Assurance has been obtained that actions will be addressed during 2020/21.
Passenger Transport	4	1	5	2	Will be subject to a further formal follow up review.
Access to Council Buildings	4	1			Will be subject to a further formal follow up review.
Frederick Bird Primary School	3	1	9	8	The outstanding actions have been followed up through the self-assessment process – see Appendix Two for results
Children's Services Financial Culture			11	8	

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

Appendix Two – Results of Self-Assessment Follow up Exercise

Audit Review	High Risk Actions Agreed	High Risk Actions Implemented	Medium Risk Actions Agreed	Medium Risk Actions Implemented	Comments
Changes to invoice processing /			1	1	
goods receipting					
Tax evasion risk assessment			2	2	
Purchasing cards			1	1	
Database system administration*			2	1	
Housing benefit overpayments follow up			4	3	
Repairs and maintenance	2	0	4	0	Completion of actions has been delayed due to implementation of a new ICT System and a restructure within the Service. Revised implementation dates have been agreed.
Network infrastructure *			1	0	
Controls over accessing systems	1	0	3	0	A working group has been established and has met to take these actions forward.
Mandatory training	3	1	2	1	
Spon Gate Primary School	1	1	4	4	
Learning disabilities providers contract management	2	2	3	3	
Cyber security *			2	1	
Permanence payments	1	0	6	0	Implementation of actions has been delayed to prioritisation of the Business Services restructure. Discussions are currently taking place to agree a way forward.
Remote / flexible working *			3	2	
IT Service desk			3	3	
ICT audit follow up			3	3	
Community support grant			1	1	
Sowe Valley Primary School	1	1			

Audit Review	High Risk Actions Agreed	High Risk Actions Implemented	Medium Risk Actions Agreed	Medium Risk Actions Implemented	Comments
Sharepoint / legacy storage			3	3	
Foster carer experience *			4	2	
New payroll processes			1	0	Recommendation superseded
Direct payments	1	1	2	2	
Organised crime checklist			7	3	
GDPR readiness follow up *	1	0			
Data protection follow up *	1	0	1	0	
Castlewood School	1	1			
ICT strategy, policies and procurement			4	3	
Frederick Bird Primary School follow	2	2	1	1	
up					
Aldermoor Farm Primary School	1	1	5	5	
Community support grant controls	1	1	2	2	
over vouchers					
System upgrades / development			2	0	
Grange Farm Primary School	2	2	5	4	
Agency workers contract			5	2	

Revised implementation dates have been agreed for all outstanding actions and these will be followed through a further self-assessment / validation checks.

^{*}These relate to the outstanding / residual actions from the audit which have been followed up during the period and does not reflect the total number of recommendations originally agreed and which have been followed up previously.