Report to: Audit Committee

Date: **15 March 2016**

Title: Update on Progress on the 2015-16 Internal

Audit Plan

Portfolio Area: Support Services

Wards Affected: All

Relevant Scrutiny Committee: Overview and Scrutiny

Urgent Decision: **N** Approval and **Y**

clearance obtained:

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Recommendations:

It is recommended that:

1. The progress made against the 2015/16 internal audit plan, and any key issues arising are noted.

1. Executive summary

- 1) The purpose of this report is to inform members of the principal activities and findings of the Council's Internal Audit team for 2015/16 to the 31 January 2016, by:
 - Providing a summary of the main issues raised by completed individual audits; and
 - Showing the progress made by Internal Audit against the 2015/16 annual internal audit plan, as approved by this Committee in February 2015.

2. Background

The Audit Committee, under its Terms of Reference contained in West Devon Borough Council's Constitution, is required to consider the Head of the Internal Audit Partnership's audit reports, to monitor and review the internal audit programme and findings, and to monitor the progress and performance of Internal Audit.

The Accounts and Audit (Amendment) (England) Regulations 2015 require that all Authorities need to carry out an annual review of the effectiveness of their internal audit system, and need to incorporate the results of that review into their Annual Governance Statement (AGS), published with the annual Statement of Accounts.

The Internal Audit plan for 2015/16 was presented to and approved by the Audit Committee in April 2015. Overall, good progress has been made against the 2015/16 audit plan. Progress in the period up to 31 January 2016 has included the finalisation of work carried out in 2014/15 and in completing assignments in accordance with timescales agreed with management.

3. Outcomes/outputs

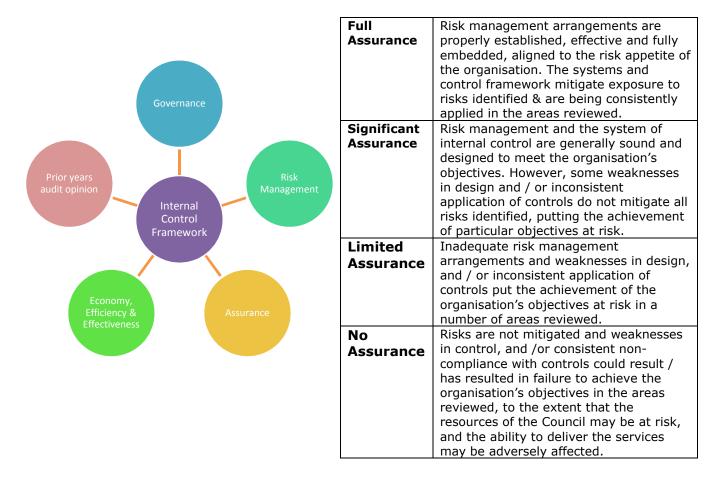
The Public Sector Internal Audit Standards require the Head of Internal Audit to provide a report providing an opinion that can be used by the organisation to inform its governance statement.

In carrying out our work, Internal Audit assess whether key, and other, controls are operating effectively within the area under review, and an opinion on the adequacy of controls is provided to management as part of the audit report. All final audit reports include an agreed action plan with responsible officers and target dates to address any control issues or recommendations for efficiencies identified.

Overall, based on work performed during 2015/16 and our experience from the current year progress and previous year's audit, the Head of Internal Audit's Opinion is of "Significant Assurance" on the adequacy and effectiveness of the Authority's internal control framework.

This assurance statement is in line with the definitions below and will provide Members with an indication of the direction of travel for their consideration for the Annual Governance Statement

The above statement of opinion is underpinned by our consideration of:



The Authority's internal audit plan for the current year includes specific assurance, risk, governance and value added reviews which, together with prior years audit work, provide a framework and background within which we are able to assess the Authority's control environment. These reviews have informed the Head of Internal Audit's Opinion on the internal control framework.

In carrying out systems and other reviews, Internal Audit assesses whether key, and other, controls are operating satisfactorily within the area under review, and an opinion on the adequacy of controls is provided to management as part of the audit report. All final audit reports include an action plan which identifies responsible officers, and target dates, to address control issues identified during a review. Implementation of action plans rests with management and these are reviewed during subsequent audits or as part of a specific follow-up process.

The 2015/16 Internal Audit Plan is attached at **Appendix A**. This has been extended to show the final position for each audit.

The reporting of individual key recommendations is set out at **Appendix B**. This is an ongoing part of the report to advise the Audit Committee in detail of significant findings since the last report and confirm that the agreed action has been implemented or what progress has been made.

Appendix C provides a summary of unplanned work carried out by the team. This work is by definition unexpected work, which ranges from advice to managers on control issues, to the investigation of potential irregularities. Tasks are budgeted from the 'Contingency' line of the audit plan.

Non Compliance with Contract or Financial Procedure Rules - there are no significant issues to bring to the attention of the Committee so far this year. Four applications for Contract / Financial Procedure Rules have been received in the year to date, all were accepted.

Fraud Prevention and Detection and the National Fraud Initiative Counter-fraud arrangements are a high priority for the Council and assist in the protection of public funds and accountability. The Cabinet Office runs a national data matching exercise (The National Fraud Initiative - NFI) every two years and the Council are in the process of concluding its review of the data matches that were received as part of the 2014/15 exercise. The NFI exercise identifies potentially erroneous or fraudulent payments in areas such as housing benefits, awards of council tax single persons discounts and creditor payments.

Irregularities – there are no irregularities to report in the year to date.

4. Options available and consideration of risk

No alternative operation has been considered as the failure to maintain an adequate and effective system of internal audit would contravene the Accounts and Audit Regulations, 2003, 2006, 2011 and 2015.

5. Proposed Way Forward

We continue to be flexible in our approach and with the timetabling of audits to ensure that resources are assigned to specific areas of the plan to enable our work to be delivered at the most effective time for the organisation.

6. Implications

Implications	Relevant to proposals Y/N	Details and proposed measures to address
Legal/Governance	Ý	The Accounts and Audit Regulations 1996 issued by the Secretary of State for the Environment require every local authority to maintain an adequate and effective internal audit.
		The work of the internal audit service assists the Council in maintaining high standards of public accountability and probity in the use of public funds. The service has a role in promoting robust service planning, performance monitoring and review throughout the organisation, together with ensuring compliance with the Council's statutory obligations.
Financial	Y	There are no additional or new financial implications arising from this report. The cost of the internal audit team is in line with budget expectations.
Risk	Y	The work of the internal audit service is an intrinsic element of the Council's overall corporate governance, risk management and internal control framework.
Comprehensive Im	pact Assess	ment Implications
Equality and Diversity	N	There are no specific equality and diversity issues arising from this report.
Safeguarding	N	There are no specific safeguarding issues arising from this report.
Community Safety, Crime and Disorder	N	There are no specific community safety, crime and disorder issues arising from this report.
Health, Safety and Wellbeing	N	There are no specific health, safety and wellbeing issues arising from this report.
Other implications	N	There are no other specific implications arising from this report.

Supporting Information

Appendices:

There are no separate appendices to this report.

Background Papers:

Annual Internal Audit Plan 2015/16 as approved by the Audit Committee on 24 February 2015.

Approval and clearance of report

Process checklist	Completed
Portfolio Holder briefed	Yes
SLT Rep briefed	Yes
Relevant Exec Director sign off (draft)	Yes
Data protection issues considered	Yes
If exempt information, public (part 1) report	N/A
also drafted. (Committee/Scrutiny)	

APPENDIX A

		lanned Fieldwork mber of started	Issued in draft	Management comments	Final	Opinion			Comments	
Addit Flair	Days	Starteu	iii urait	received		High Standard	Good Standard	Improvements Required	Fundamental Weaknesses	
MAS & Budgetary Control	4									Draft report issued.
Creditor Payments	4	•								
Payroll	4		•							Draft report issued.
Council Tax	4	•								
Business Rates (NNDR)	4									
Benefits Payments	6	•								
VAT	4									Summary in App B below.
Main Financial Systems	30									
Cash Collection and Banking	3	•	•	•				•		Summary to Audit Committee – September 2015
Partnership Management	-									Deferred to 2016/17. The 3 days used for Procurement & Contract Management review below.
Procurement and Contract Management	3			•	•			•		This review was brought forward from 2016/17 plan. Summary in App B below.
ICT Service Operation	4									
Internet Monitoring	1		•	•						Issued as a combined report,
Email Monitoring	1									summary to Audit Committee - September 2015.
Performance Management - PIs	5									
Risk Management	5									
T18 Transformation Programme	4									
Leisure Centres	3	•								

APPENDIX A

Projects agreed in the	Planned Fieldwork		Issued	Management	Final	Opinion (final reports only)				
Audit Plan	Number of Days	started	in draft	comments received		High Standard	Good Standard	Improvements Required	Fundamental Weaknesses	Comments
Waste Management	3									
Car Parking	4	•	•				-			Draft report issued.
Building Regulations	3									
Commercial Enforcement	4			•						Summary in App B below.
Corporate Governance Annual Governance Statement (AGS)	3	-	-	-	-	-	-	-	-	Review of the Code of Corporate Governance presented to June 2015 Audit Committee under separate cover.
Counter Fraud Work	5	•	■.				•			Draft report issued.
Follow Up of Previous Year's Audits	4	•				-	-	-	-	
Contingency (Unplanned) & Advice	8	-	-	-	-	-	-	-	-	
Audit Management, including • Audit Planning • Partnership audit Management • Monitoring against the plan • Reports to management and audit	7	•	-	-	•	-	-	-	-	Includes attendance at Audit Committee – Annual Report presented to Audit Committee on 7 July 2015, progress report on 29 September.
Other Systems & Audit Work)	70									
Overall Total	100									

Planned Audit 2015/16 – Final Reports

The following tables provide a summary of the audit opinion and main issues raised in the reports issued to managers. In all cases (unless stated) an action plan has been agreed to address these issues.

Definitions of Audit Assurance Opinion Levels

High Standard

The system and controls in place adequately mitigate exposure to the risks identified. The system is being adhered to and substantial reliance can be placed upon the procedures in place. We have made only minor recommendations aimed at further enhancing already sound procedures.

Good Standard

The systems and controls generally mitigate the risk identified but a few weaknesses have been identified and / or mitigating controls may not be fully applied. There are no significant matters arising from the audit and the recommendations made serve to strengthen what are mainly reliable procedures.

Improvements Required

In our opinion there are a number of instances where controls and procedures do not adequately mitigate the risks identified. Existing procedures need to be improved in order to ensure that they are fully reliable. Recommendations have been made to ensure that organisational objectives are not put at risk.

Fundamental Weaknesses Identified

The risks identified are not being controlled and there is an increased likelihood that risks could occur. The matters arising from the audit are sufficiently significant to place doubt on the reliability of the procedures reviewed, to an extent that the objectives and / or resources of the Council may be at risk, and the ability to deliver the service may be adversely affected. Implementation of the recommendations made is a priority.

Planned Audit 2015/16 - Final Reports

Subject	Audit Findings	Management Response		
VAT	Audit Opinion			
	Good Standard - The majority of the areas reviewed were found to be adequately controlled. Generally risks are well managed but a few areas for improvement have been identified.			
	Conclusions There are a small number of areas where action could be taken to strengthen those controls already in place. These include ensuring that:			
	There is sufficient experienced cover in the absence of the VAT Accountant;	The Council has recently recruited to a Level 6 Specialist Accountant post and arrangements will be put		
	The Partial Exemption calculation for each authority is calculated on a regular basis;	in place for training in VAT for this postholder, so that they are able to provide sufficient cover.		
	Officers provide valid VAT invoices for payments made by purchase card to allow VAT to be recovered; and	The Level 5 Specialist Accountant has recently attended a course on the Partial Exemption calculation and regular calculations will be undertaken. External		
	Bad debts are written off on a timely basis, allowing any output tax to be recovered.	assistance from a VAT advisor on Partial Exemption is also being procured.		
		The Level 5 Specialist Accountant will address this issue with staff to ensure VAT invoices are received.		
		The Level 5 Specialist Accountant will address this issue to ensure bad debts are written off on a timely basis, allowing output tax to be recovered.		

Procurement

Audit Opinion

Improvements Required - There are a number of instances where controls and procedures do not adequately mitigate the risks identified. Existing procedures need to be improved in order to ensure that they are fully reliable. Fairly extensive recommendations have been made to ensure that organisational objectives are not put at risk.

Conclusions

We are aware that the Corporate Procurement Officer has recently taken a report to the Executive Director, making recommendations as to the future direction of the procurement function, at both a strategic and an operation level and it is acknowledged that that report addresses a number of issues raised in our audit report.

Recommendations include the need to ensure that:

- The electronic tendering system is used as an end to end audit trail of
 procurement activity, as well as a tool to monitor contracts, with consideration
 given to the benefits of purchasing the contracts management module;
- The contracts register is brought up to date;
- Planned training is delivered to officers with responsibility for awarding contracts;
- A contract review is initiated to ensure that any services currently being supplied by a contractor who has not been engaged via the correct process are procured in line with Contract Procedure Rules and legislative requirements and any risks are mitigated;
- The Councils' Corporate Procurement Strategy which is currently being worked on by the Devon Districts Procurement Group is updated.

Target is to roll the tendering system out for the start of the new financial year 16-17.

The Corporate Procurement Officer has confirmed that work is underway to update the Contracts Register.

Courses have been delivered in 4th quarter 2015 and more will be planned in during 2016 and ongoing thereafter.

Support Services will review and prioritise based on duration and value of these contracts and the services they are delivering. The target for the completion of this exercise is end of Q1 16/17.

The Corporate Procurement Strategy has been completed and is currently being adopted and implemented by the Councils.

Commercial Enforcement

Audit Opinion

Good Standard - The majority of the areas reviewed were found to be adequately controlled. Generally risks are well managed but a few areas for improvement have been identified.

Conclusions

At the request of the Environmental Health COP Lead, the audit focussed on the Food Safety element of Commercial Enforcement. Following the restructure of the Council as part of the T18 programme, the Environmental Health COP has reviewed the delivery of the Food Safety service in an effort to ensure that its statutory duties are met with less staff resource than previously.

Generally the Food Safety service meets the requirements of the FSA, for example:

- The expected policies and procedures are in place, although we have made some recommendations where minor amendments could be made;
- There is regular managerial review of inspections carried out by Food Safety officers and of all enforcement action;
- There is peer review to ensure the consistency of interventions, both internally and with other authorities: and
- The service participates in external sampling programmes both regionally and nationally.

Some areas were identified where action could be taken to strengthen those controls already in place. These have largely arisen due to limited staff resource and changes of responsibility following the aforementioned restructure:

- Ensure that the Food Safety service plan is updated annually and approved by members;
- Ensure that it is possible to produce the LAEMs data required by the FSA on a timely basis;
- Ensure that sufficient staff resource is available to complete the programmed food premises interventions;

Policies and procedures are to be reviewed and updated by the end of 2015/16.

The Service Plan is to be updated for 2016/17 and presented to members for approval.

Officers were to submit a test data set to the FSA in December 2015 to confirm that the required data can be provided in the correct format from the new software.

Capacity is expected to increase as administrative tasks are passed to Case Managers under the new model. Also the benefits of technological assistance are to be investigated.

These are to be considered and included in the service

APPENDIX B

	plan.
Consider whether any service performance indicators may be of benefit; and	The policies are to be published as they are reviewed and updated.
Arrange for relevant policies to be published, e.g. Complaints policy and Food Safety Enforcement policy.	

Planned Audit 2015/16 – Work Complete (No Audit Report)

Subject	Comments
System of Internal Control (SIC), and Annual Governance Statement (AGS)	Included within the Internal Audit Annual Report presented to the June Audit Committee was the internal audit opinion providing assurance that the Council's systems contain a satisfactory level of internal control.
	In addition, there is a requirement for the Council to prepare an AGS statement. Internal Audit provided support and challenge, as appropriate, to the Senior Leadership Team as they drafted the statement in respect of the 2014/15 financial year. The S151 Officer presented the 2014/15 AGS to the Audit Committee on 30 July 2015 with the draft accounts.
Exemptions to Financial Procedure Rules	Four applications for Contract / Financial Procedure Rules have been received in the year to date, all were accepted.

Internal Audit: 2015/16 Progress Report