

Meeting of:	Audit Committee				
Date of Meeting:	Monday, 01 March 2021				
Relevant Scrutiny Committee:	Corporate Performance and Resources				
Report Title:Progress Against the Audit Risk Based Plan 1st April 2020 to 15th F 2020					
To provide members of the Committee with a position statemPurpose of Report:progress being made against the audit work included and approv the Internal Audit Risk Based Plan 2020-21.					
Report Owner:	Head of the Regional Internal Audit Service				
Responsible Officer:	Head of Finance & Section 151 Officer				
Elected Member and Officer Consultation:No Elected Members have been consulted. Legal Services and H Finance.					
Policy Framework: The proposals in this report are in accordance with the policy fram budget.					

Executive Summary:

- The progress made against the approved internal audit risk-based plan as at 15th February 2021 is detailed in Appendix A. It shows that 21 reviews have been finalised, 14 with an audit opinion whilst 2 reports have been issued in draft.
- Based on the assessment of the strengths and weaknesses of the areas examined through testing of the effectiveness of the internal control environment an audit opinion of substantial assurance has been given to 5 of the completed audits and an opinion of reasonable assurance to 8; 1 has resulted in an audit opinion of limited assurance.
- 34 recommendations have been made to strengthen the control environment; all are categorised as medium priority and will be monitored to ensure they are effectively implemented.

# Recommendation

1. That members of the Committee note the content of the report and the progress made against the 2020-21 Internal Audit Annual Risk Based Plan.

# **Reason for Recommendation**

**1.** To keep Audit Committee informed.

# 1. Background

- **1.1** In accordance with the Public Sector Internal Audit Standards, the Head of Audit is responsible for developing a risk-based annual audit plan which takes into account the Council's risk management framework. Within the Standards there is also a requirement for the Head of Audit to review and adjust the plan, as necessary, in response to changes in the Council's business, risks, operations, programs, systems, controls and resources. The Head of Audit must also ensure that Internal Audit resources are appropriate, sufficient and effectively deployed to achieve the approved plan.
- **1.2** The Internal Audit Plan for 2020-21 was submitted to Audit Committee for consideration and approval on 24th September 2020. The Plan outlined the assignments to be carried out which will provide enough coverage to provide an opinion at the end of 2020-21 whilst having regard to the unprecedented impact of the pandemic.

# 2. Key Issues for Consideration

- 2.1 Progress made against the plan for the period 1st April to 15th February 2021 is attached at Appendix A. This details the status of each planned review, the audit opinion and the number of any high or medium recommendations made to improve the control environment. It should be noted that some reviews listed have no audit opinion, for example advice and guidance and Audit Committee reporting. This is because the audit work carried out in respect of these items is planned but the nature of the work does not lead to testing and the formation of an audit opinion.
- **2.2** Appendix A illustrates that as at 15th February 2021, 21 pieces of work have been completed of which 14 audit reviews have resulted in an opinion being provided. A further 2 reviews have been completed and draft reports issued which are awaiting feedback from Service Departments. In addition, 23 audits are currently on-going with another 2 having been allocated and should be commencing shortly.

**2.3** Based on the assessment of the strengths and weaknesses of the areas examined through testing of the effectiveness of the internal control environment an audit opinion of substantial assurance has been given to 5 completed audits and an opinion of reasonable assurance to 8 completed audits. The remaining completed audit review was given an audit opinion of limited, that is only limited assurance can be placed on the current system of internal control. This is detailed as follows:

#### **Direct Payments Follow Up**

In June 2018, a no assurance audit report was issued. Two subsequent follow up audits in January 2019 and September 2019 found little improvement had been made, many recommendations remained outstanding and limited assurance opinions were given to the existing control environment. The purpose of this review was to examine the current working practices to identify the progress made to improve the controls and mitigate the risks that have previously been identified. This recent audit identified that whilst some improvements have been made several remain outstanding, partly due to the COVID19 pandemic hindering progress. However, all outstanding recommendations have been accepted and are due to be fully implemented by June 2021 when a further audit review will be undertaken.

- **2.4** Appendix A illustrates that a total of 34 medium (significant) recommendations have been made to improve the control environment of the areas reviewed. The implementation of these recommendations is monitored to ensure that improvements are being made.
- 2.5 It is recognised that some service areas are currently under intense pressure and where possible planned audit work is rearranged to accommodate any service requests. Appendix A shows that many of the planned audit reviews have now been allocated and it appears that sufficient coverage will be completed by the year end to form an audit opinion.

# 3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?

**3.1** The Annual Risk Based Plan contains audit reviews that will be service specific and that will assist in understanding how those services undertake the five ways of working and how they deliver the well-being objectives.

# 4. Resources and Legal Considerations

# <u>Financial</u>

**4.1** There are no resource implications as a direct consequence of this report, but effective audit planning and monitoring are key contributors in ensuring that the Council's assets and interests are properly accounted for and safeguarded.

# **Employment**

**4.2** None as a direct consequence of this report.

# Legal (Including Equalities)

**4.3** The provision of an adequate and effective Internal Audit function is a legal requirement under the Accounts and Audit (Wales) Regulations 2014 as amended from time to time. There are no equalities implications as a direct consequence of this report.

# 5. Background Papers

None

#### Vale of Glamorgan Council - Activity Against Audit Plan 1st April 2020 to 15th February 2021

Area	Audit Scope / Risk	Status		Recommendations			
			Substantial	Reasonable	Limited	High	Medium
Annual Governance Statement 2019-20	The completion of the Council's AGS (including the Governance Assurance Statements from Corporate Officers and Senior Management). Deadline date June 2020.	completed					
Annual Governance Statement 2020/21	To make preparations for the production of the AGS for 2020/21						
Safeguarding	This review will include an annual assessment of the Council's overall operating model for safeguarding; reviewing the adequacy of assurances obtained by the Council in place for vulnerable adults and children particularly having regard to the impact of COVID19.	on-going					
Grant Certification Work	Under the conditions of the specific grant determination, the Head of Audit must certify that the conditions of the grant have been complied with.						
	Bus Service Support Grant (BSSG)	completed		<b>√</b>			2
	Education Improvement Grant 2019/20	completed		<b>√</b>			0
	Housing Support Grant 2019-20	completed	٧				0
	Post 16 Grant 2019-20	completed					
Purchasing Cards	To provide assurance that the Council's guidance for purchasing cards is sufficient and there is compliance to these policies and procedures across the Council	completed		v			8
Risk Management	Successful risk management relies on a corporate approach to ensure that all risks are identified and managed systematically and consistently across the Council and any new risks due to COVID19 have been considered.	draft issued					
COVID - Remote Working	Increase in remote working due to COVID19 - impact on governance and internal control arrangements using a questionnaire	on-going					
SRS Joint Service	To provide assurance to the Shared Regulatory Service Board on the systems and processes in place in respect of the overall control environment including governance, risk management and internal control for the 2019-20 Financial Year.	completed	v				1
Contract Monitoring	To provide assurance that during negotiation and settlement of contract disputes / final payments there is adherence to Council's policies and procedure including CPR and PCoP.	on-going					
Tender Evaluation & Award	To undertake a review of the procedures and processes associated with a number of Contracts and compliance to the Council's Rules and Regulations focusing on tender and award of contracts also having regard to any impact COVID19 has had to these processes.	on-going					
SRS Joint Service	Undertake a service specific compliance review - area to be confirmed						
Schools	To undertake a number of school based reviews as well as cross cutting thematic reviews						
	in accordance with the Internal Audit risk based assessment.						
	All Saints School Follow Up	on-going					
	Stanwell Payroll Follow Up	completed	√				0
	School Purchasing Cards	on-going					
	School Governance	on-going					

Area	Audit Scope / Risk	Status	Opinion	Recommendations	Appe
School Risk Assessment	To review the annual controlled risk self – assessment for schools. The aim of the process is to enable Head Teachers to review their internal controls and to ensure that they				
	undertake and comply with the requirements of current legislation and the Financial Procedure Rules particulalry during the pandemic.	on-going			
School deficits	To review the monitoring processes both within the school and between the school and LA to ensure that deficit balances are sufficiently monitored and the recovery plan is achievable	completed	V	2	
Catering Company	To provide assurances on the operation of the Catering Company.	on-going			
ALN - Out of County Charges	To provide assurance that monitoring of expenditure is adequate	on-going			
Youth Services	Compliance to Council's policies and procedures	on-going			
Material Systems – Key Financial Systems	A rolling programme of audits is adopted for material systems. The new arrangements adopted due to COVID19 will be examined to provide assurance that controls are still in place.				
	Income Collection Cash Control	completed	√	2	
	Free School Meals	allocated			
	Creditors	allocated			
Payroll	Review starters and leavers, changing records / data	completed	√	2	
Members Code of Conduct	Review of compliance of Members to the Council's Code of Conduct	completed	√	0	
PCI – DSS (Payment Card	To review the procedures and processes in operation relating to PCI - DSS to determine if				
Industries – Data Security	the previously identified areas of weakness have been fully rectified and that the control	on-going			
Standards)	environment is robust.				
ICT Audit	In consultation with ICT, systems reviews will be undertaken across Directorates to ensure robust controls are evident and operating effectively including the control and distribution of ICT equipment since the increase of home working since the outbreak of				
Procurement	COVID19 This audit will review the procurement framework and a sample of individual procurement activities across the Council in order to evaluate the level of compliance with legislation and the Council's Constitution.				
Disabled Facilities Grants	To review the process and payments in regard to grants paid to applicants				
Adoption Service	To provide assurance to the governance board on the adequacy and effectiveness of the overall control environment including Governance, Risk Management and Internal Control for 2018-19.	completed	√	1	
Flying Start	To provide assurance that the Council's policies and procedures are complied with	on-going			
Partnership Working	To review the governance arrangements in place to ensure the Council is correctly represented in regard to the Regional Emergency Duty Team	potential joint work with Cardiff Council			
Direct Payments Follow Up	To follow up on the previous limited report to ensure improvements have been made to the control environment	completed	v	6	
Complaints & Representation	To follow up on the previous limited report to ensure improvements have been made to	on-going			
Follow Up	the control environment				
Contract & Commissioning Follow Up	To follow up on the previous limited report to ensure improvements have been made to the control environment	deferred until 2021/22 at request of Chief Officer			

Area	Audit Scope / Risk	Status	Opinion	Recommendations	Appen
	This allocation covers Member reporting procedures, mainly to the Audit Committee,				
CMT Reporting	plan formulation and monitoring, and regular reporting to, and meeting with, the Section				
1 0	151 Officer, Corporate Management Team and the Internal Audit Shared Service Board.				
	Effectiveness of Audit Committee	on-going			
Compliance – expenses / mileage	Review of expenses / mileage claims submitted which are over three months old.	ongoing - since the 1st			
claims	Ongoing throughout the year.	April 2020, 149 claims			
		have been reviewed.			
Exemptions to Contract / Finance	To challenge the use of exemptions to both Contract and Finance Procedure Rules via the	ongoing - 45 exemptions /			
Procedure Rules	waiver procedure. Challenge provided throughout the year.	waivers have been agreed			
		to date.			
Advice & Guidance	To allow auditors to facilitate the provision of risk and control advice which is regularly	on-going			
	requested by officers within the authority, including maintained school based staff.	5 <u>B</u> 011.B			
Data Analytics	Data Analytics is proving to be a useful internal audit tool as councils become more	on-going			
Data Analytics	reliant on electronic data, as data analytics enables a vast amount of data to be analysed	OU-ROUNE			
	when selecting testing samples				
Compliance with PSIAS	Review compliance with the Public Sector Internal Audit Standards.	completed			
Compliance with PSIAS Carry Forward from 2019-20	· ·	completed			
Carry Forward Ironi 2019-20	Provision for those assignments which are still ongoing at the end of 2019-20. C/F C1V Software Application				
		draft issued			
Closure of reports - 2019/20	To finalise all draft reports outstanding at the end of 2019-20.	completed			
Follow up Reports	To ensure that all limited assurance reports are followed up in a timely manner				
	School Budget Monitoring Follow Up	completed	V	1	
Recommendation Monitoring	Monitoring the implementation of Internal Audit recommendations in consultation with	on-going			
	service areas which have received these recommendations.				
Annual Opinion Report 2019-20	To prepare and issue the Head of Audit's Annual Opinion Report 2019/20.	completed			
Annual Opinion Report 2020-21	Preparation for the production of the 2020-21 Annual Opinion Report				
Audit Planning 2020 - 21	To prepare, present and monitor the annual risk based audit plan for 2020/21.	on-going			
Audit Planning 2021 - 22	To prepare and present the annual risk based audit plan for 2021/22.				
External Audit Liaison	To ensure that a "managed audit" approach is followed in relation to the provision of				
	internal and external audit services.				
Emerging Risks / unplanned	To enable Audit Services to flexibly respond to provide assurance activity as required.				
	Primary School - Financial Information Review	completed		2	
	Whistleblowing - Freedom of Information Request Issue	completed		1	
	Whistleblowing - Contracted and timesheet hours	completed	V	6	
	Homelessness	deferred			
	Dinas Powys Complaint	on-going		1	
	Contract Award - Lessons to be Learnt	on-going			
Fraud / Error / Irregularity		on-going			
. , -01	National Fraud Initiative - Collection of data and analysis of matches for the NFI exercise,				
	acting as first point of contact and providing advice and guidance to key contact officers.				
	Matches will include business grants made available due to COVID19				

Area	Audit Scope / Risk	Status	Opinion		IS Opinion Recommend		endations	Appendix A	
Fraud / Error / Irregularity	Irregularity Investigations - Reactive work where suspected irregularity has been detected. Council mobile phone left in taxi	fact finding report issued							
Fraud / Error / Irregularity	Anti-Fraud & Corruption – Proactive - Proactive counter-fraud work that includes targeted testing of processes with inherent risk of fraud. Overall Totals	on-going	5	8	1	0	34		