

Committee Name and Date of Committee Meeting

Audit Committee – 27th July 2023.

Title

Internal Audit Progress Report for the period 1st May 2023 to 30th June 2023.

Is this a Key Decision and has it been included on the Forward Plan?

No.

Strategic Director Approving Submission of the Report

Judith Badger, Strategic Director, Finance and Customer Services.

Report Author(s)

David Webster, Head of Internal Audit

Tel: 01709 823282 Email: david.webster@rotherham.gov.uk

Ward(s) Affected

All wards.

Report Summary

This Progress Report provides the committee with an up to date position on the Internal Audit Plan, a summary of Internal Audit work completed during the period 1st May 2023 to 30th June 2023 and the key issues that have arisen from it, and the status of actions arising from audits. It also provides information regarding the performance of the Internal Audit function during the period.

Recommendations

The Audit Committee is asked to:

- 1) Note the Internal Audit work undertaken since the last Audit Committee, 1st May 2023 to 30th June 2023, and the key issues that have arisen from it.
- 2) Note the information contained regarding the performance of Internal Audit and the actions being taken by management in respect of their performance.

List of Appendices Included

Appendix A – Internal Audit Plan 2023/24

Appendix B – Summary of work completed since the last meeting

Appendix C – Internal Audit Performance Indicators

Background Papers

Public Sector Internal Audit Standards and Associated Local Government Application Note.

Accounts and Audit (England) Regulations 2015.

Consideration by any other Council Committee, Scrutiny or Advisory Panel
No.

Council Approval Required
No.

Exempt from the Press and Public
No.

Internal Audit Progress Report for the period 1st May 2023 to 30th June 2023

1. Background

- 1.1 CIPFA guidance for Audit Committees in Local Authorities gives the Audit Committee a clear role in supporting the effectiveness of the internal audit process. This role is reflected in the Terms of Reference of the committee. To fulfil this role the committee receives updates on the work of internal audit including key findings, issues of concern and action in hand as a result of internal audit work. In addition, it receives information on performance relative to the audit plan.
- 1.2 Public Sector Internal Audit Standards require that the Head of Internal Audit reports periodically to the Audit Committee. This is reflected in the Audit Charter which provides for Progress Reports to be presented to the Audit Committee regarding the audit plan and progress against it; resource requirements; the results of audit activities; the tracking of audit recommendations; and the performance of the audit team.
- 1.3 This report includes the position up to the end of June 2023 on the completion of the annual plan for 2023/24, the reports finalised in May and June 2023 and performance indicators for the team.

2. Key Issues

2.1 Internal Audit Annual Plan

Internal Audit produced a risk based Annual Audit Plan for 2023/24 and presented it to the Audit Committee at its meeting on 14th March 2023. As a result of planning meetings with Directorate Leadership Teams several audits were added to the 2022/23, which meant some audits within that plan were delayed, with a knock-on effect on the 2023/24 plan. To account for this, a new plan has been produced for 2023/24 incorporating the remaining audits from 2022/23 and deferring some low priority reviews. The plan will be kept under review throughout the year. The revised plan will provide sufficient coverage for the Head of Internal Audit to provide their annual opinion at the end of the year. The new plan is attached, showing the position at the end of June 2023.

2.2 Audit Work Undertaken During the Period

Internal Audit provides an opinion on the control environment for all systems or services which are subject to audit review. These are taken into consideration when forming our overall annual opinion on the Council's control environment. There are four possible levels of assurance for any area under examination, these being "Substantial Assurance", "Reasonable Assurance" "Partial Assurance" and "No Assurance". Audit opinions and a brief summary of all audit work concluded since the last Audit Committee are set out in **Appendix B**. Ten audits have been finalised since the last Audit Committee, eight with Substantial or Reasonable Assurance, one with Partial Assurance and one with No Assurance.

- 2.3 In addition to the planned audit assurance work, Internal Audit also carries out unplanned responsive work and investigations into any allegations of fraud,

corruption or other irregularity. There have been no investigation reports issued since the last committee meeting.

2.4 Internal Audit Performance Indicators

Internal Audit's performance against a number of indicators is summarised in **Appendix C**. Targets were met except for the time taken to issue draft reports, where two audits were marginally over the target time.

2.5 Management Response to Audit Reports

Following the completion of audit work, draft reports are sent to or discussed with the responsible managers to obtain their agreement to the report and commitment to the implementation of recommendations. This results in the production of agreed action plans, containing details of implementation dates and the officers responsible for delivery. Draft reports are copied to the relevant Head of Service and Assistant Director and final reports are also sent to the Strategic Director.

Confirmation of implementation of audit recommendations is sought from service managers when the implementation date is reached. This is automated, with alerts being sent out a week before the due date to the Responsible Manager and Head of Service, and overdue alerts sent out weekly, copied into the Assistant and Strategic Director. Managers should enter the system and provide an update on the action – either implemented or deferred.

Summary reports of outstanding actions are produced monthly and distributed to Strategic Directors. At the present time there are eleven actions that have been deferred from their original due dates, nine of which relate to Rothercare where the service is working on a new business operating model. The position will be monitored and any issues reported.

3. Options considered and recommended proposal

- 3.1 This report is presented to enable the Audit Committee to fulfil its responsibility for overseeing the work of Internal Audit. It provides a summary of Internal Audit work completed and the key issues arising from it for the period from 1st May 2023 to 30th June 2023 and information about the performance of the Internal Audit function during this period.

4. Consultation on proposal

- 4.1 The Internal Audit plan was produced after consultation with management teams. All Internal Audit reports referred to in this report have been discussed and agreed with management in the respective service areas.

5. Timetable and Accountability for Implementing this Decision

- 5.1 The Audit Committee is asked to receive this report at its 27th July 2023 meeting.

6. Financial and Procurement Advice and Implications

6.1 There are no direct financial or procurement implications arising from this report. The budget for the Internal Audit function is contained within the budget for the Finance and Customer Services Directorate.

7. Legal Advice and Implications

7.1 The provision of Internal Audit is a statutory requirement for all local authorities that is set out in the Accounts and Audit (England) Regulations 2015. These state:

“A relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.”

7.2 Internal Audit also has a role in helping the Council to fulfil its responsibilities under s.151 of the Local Government Act 1972, which are:

“each local authority shall make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs”

8. Human Resources Advice and Implications

8.1 There are no direct Human Resources implications arising from this report.

9. Implications for Children and Young People and Vulnerable Adults

9.1 This document includes a report of progress against delivery of the Internal Audit Plan. A significant proportion of the Plan is devoted to the examination of risks facing Children and Young People’s Services and Adult Social Care.

10. Equalities and Human Rights Advice and Implications

10.1 There are no direct Equalities and Human Rights Implications arising from this report.

11. Implications for CO2 Emissions and Climate Change

11.1 There are no direct CO2 and Climate Change implications arising from the report.

12. Implications for Partners

12.1 Internal Audit is an integral part of the Council’s Governance Framework, which is wholly related to the achievement of the Council’s objectives, including those set out in the Council Plan.

13. Risks and Mitigation

13.1 An effective Internal Audit Department helps to minimise the Council’s exposure to risk.

14. Accountable Officer

David Webster, Head of Internal Audit.

Tel 01709 823282 E mail david.webster@rotherham.gov.uk

Appendix A

Internal Audit Plan 2023/24

<u>CORPORATE</u>					
Audit	Risk Register and Rating	Audit Classification	Auditable Area	Number of days	Planned Quarter
Contract Management		Risk Based	A review of the tracking and management of contract delivery by contract managers, to provide assurance on how outcomes and outputs are tracked.	15	2
Total planned days – Corporate				15	

<u>ASSISTANT CHIEF EXECUTIVE</u>					
Audit	Risk Register and Rating	Audit Classification	Auditable Area	Number of days	Planned Quarter
Payroll 22/23	ACX20	Systems Based	Provide assurance on key processes for carrying out reconciliations and error resolution and prevention.	5	WIP
Big Hearts Big Changes (BHBC)	ACX23	Risk Based	Provide assurance on the governance arrangements to ensure the effective delivery of the BHBC programme.	9	2
Council Plan	ACX27	Risk Based	Provide assurance on the governance arrangements and that performance measures are being accurately reported.	7	WIP
Payroll 23/24	ACX20	Systems Based	Annual review of payroll as a fundamental system.	20	4

Workforce Plan	ACX32	Risk Based	Review of the impact of the Workforce Plan on the workforce	10	2
Establishment Control		Risk Based	Review of the management of vacancies and their disestablishment, and the match between HR and Finance establishments.	15	3
Risk Management		Risk Based	Review of the effectiveness of Risk Management.	15	4
Annual Governance Statement		Risk Based	Review of the process for the production of the AGS, after changes introduced in 2023.	10	4
Declarations of Interest		Risk Based	Review of officers' Declarations of Interest, after the introduction of new procedure.	10	2
Total planned days – Assistant Chief Executive				101	

ADULT CARE HOUSING AND PUBLIC HEALTH

Audit	Risk Register and Rating	Audit Classification	Auditable Area	Number of days	Planned Quarter
Housing Management System		Risk Based	Review and provide assurance on the adequacy of the new housing management system.	1	DRAFT
Transition from Children's Care to Adult Care		Risk Based	Review progress in implementing the Ofsted action plan and provide an assurance on the processes taken to address the weaknesses highlighted within the action plan.	8	WIP
Waiting Lists		Risk Based	Management request – addition to the plan. Review of mechanisms in place for dealing with waiting lists for assessments for care.	1	DRAFT
Liberty Protection Safeguards.	ACHPH R3 (ACI R5)	Risk Based	Provide an assurance on the Council's readiness to transfer to the new Liberty Protection Safeguards regulations.	20	2

Health & Safety Legislation and Corporate Responsibilities for Council Homes.	ACHPH R9 (H-R12)	Risk Based	To review compliance with Health and Safety regulations with regard to smoke and carbon monoxide alarms.	10	4
Housing and Estates – Anti Social Behaviour	H – R10	Risk Based	Review of current procedures and to ensure compliance with legislation.	10	1
Housing and Estates – Management of Estate Environment	H – R11	Risk Based	Review of procedures in place to ensure effective management of the estate environment.	10	1
Local Government Ombudsman's Reports		Risk Based	Management request to examine Ombudsman's report for the last two years and report on how the Council responded to any findings and if any lessons learned were acted upon.	15	2
Public Health		Risk Based	Review of drug and alcohol working partnerships including needs assessments and plans.	15	3
Health Funded Clients		Follow Up	Follow up of Partial Assurance audit in 2022/23	5	2
Homes England		Risk Based	Review of grant funding drawdowns after new processes have been implemented.	5	2
Total Planned Days – Adult Care and Housing				100	

CHILDREN AND YOUNG PEOPLES SERVICE

Audit	Risk Register and Rating	Audit Classification	Auditable Area	Number of days	Planned Quarter
-------	--------------------------	----------------------	----------------	----------------	-----------------

Commissioning Services	CPQ43	Risk Based	Review of commissioning policies in place to support safeguarding of children and young people; health and safety and Governance, which need to be in place by all contract holders. Assurance would assist Commissioning develop their quality assurance framework.	5	WIP
Youth Offending		Risk Based	Review of progress after HMIP review and peer review	1	DRAFT
Supporting Families		Risk Based	Management request – addition to the plan. Review of new systems being developed to prepare for changes to government requirements.	9	WIP
Early Years Education Provision	ES6	Risk Based	Examination of reasons for low take up of eligible 2- 3- and 4-year-old early years education with findings feeding into the Early Years Strategy.	10	4
Social; Emotional and Mental Health Needs (SEMH)	ES17	Risk Based	Scope of the audit to be finalised with CYPS, based upon Local Area Provision and inclusion pathways.	15	3
Safeguarding	SCF3	Risk Based	Review of procedures for placing 16+ children with external provider regulated accommodation	10	2
Unaccompanied Asylum-Seeking Children (UASC)	SCF6	Risk Based	Review of procedures for age assessments of UASC.	10	1
Special Education Needs and Disability (SEND)	CYPS03	Risk Based	Review of Education, Health and Care Plans (EHCP) across all the domains, including Health and Social Care Partners.	20	3
Schools CRSA		Risk Based	Conduct the annual school's Control and Risk Self-Assessment to form the basis for school visits.	10	2
Schools Themed Audits		Risk Based	Sample visits to schools, based on the results of the self-assessment.	20	4
Total Planned Days - Children and Young People's Services				110	

FINANCE AND CUSTOMER SERVICES**Finance**

Audit	Risk Register and Rating	Audit Classification	Auditable Area	Number of days	Planned Quarter
NNDR	FCS2	Systems Based	Fundamental System. Review of new processes in respect of NNDR reliefs to provide a level of assurance of compliance with these.	1	DRAFT
Procurement Governance	Operational Risk.	Risk Based	Review procurement procedures and assess Directorate adherence to them. To include, where applicable, a review of Directorate procedures.	8	WIP
Debtors		Systems Based	Review debtors procedures and assess Directorate adherence to them. To include, where applicable, a review of Directorate procedures.	2	WIP
Rebate Scheme		System Based	To review the processes used to pay the one-off Council Tax Energy rebate payment to RMBC residents	1	DRAFT
Council Tax		Systems Based	Fundamental System. Scope of the audit to be agreed with Assistant Director Finance, to include core systems not currently being externally stored.	10	4
Contract Renewals and Expiry		Systems Based	Review of Directorate compliance with procedures for planning for renewing contracts, in line with Cabinet Office Best Practice.	20	1
Creditors		Systems Based	Fundamental System. Audit resources to examine procedures regarding move towards "faster payments", scope to be finalised with the Assistant Director Finance.	10	4
Rents		Systems Based	Fundamental system. Audit resources to examine changes to the rents settings in the system and ensure calculated rents are feeding through the system.	10	4

Capital Programme		Systems Based	Review the updated capital procedures and provide assurance that they are being complied with and that expenditure is appropriately approved, controlled and monitored.	15	2
<u>Customer Information & Digital Services</u>					
Hosted & Cloud-based systems	Operational Risk	Risk Based	Provide assurance on the IG policies & procedures for cloud-based storage platforms, including recovery, protection & security arrangements.	1	DRAFT
Application Management	Salford Risk Assessment	Risk Based	Review of controls around access control, system availability. Specific applications to be agreed.	10	2
To be agreed			Technical audit to be carried out by Salford IAS	10	3
Customer Digital Programme			Audit contribution to projects designed to increase efficiency.	20	n/a
<u>Legal Services</u>					
Registrars		Risk Based	Review of processes and controls after external inspection	15	WIP
Litigation Service		Risk Based	Review of the legal support provided to Adult Care and Child Protection	20	1
Land Terrier		Risk Based	Review of the registration of Council land	10	3
Governance		Risk Based	Review of the operation of processes around decision-making within the Council.	15	4
Total Planned Days – Finance and Customer Services				178	

REGENERATION AND ENVIRONMENT

Audit	Risk Register and Rating	Audit Classification	Auditable Area	Number of days	Planned Quarter
Waste	CSS13	Risk Based	Scope to be confirmed / agreed.	17	WIP
Cash collection and income		Risk Based	Review the arrangements for the collection, monitoring, reconciliation of cash and other forms of income from various establishments.	13	WIP
Building Security Follow Up		Follow Up	Follow Up of Partial Assurance audit.	1	DRAFT
Home to School Transport	R&E 8 & CST 15	Risk Based	Provide assurance on the effectiveness of the Home to School Transport service.	10	1
Vehicle Operators Licence	R&E39 & CSS44	Risk Based	Review compliance with regulatory requirements	10	2
Fire Strategy	R&E25 & PRT38	Risk Based	Provide assurance that RMBC as the corporate landlord has an effective fire strategy.	10	2
Building Control		Risk Based	Provide assurance after changes in regulations around payments and inspection visits.	10	1
Trading Standards		Risk Based	Review of the operation of Trading Standards.	15	4
Green Spaces		Risk Based	Review over the Health and Safety controls around Green Spaces.	15	4
Tree Service follow-up	R&E52 & CST9	Risk Based	Follow up of No Assurance audit in 2022/23	10	3
Museum Collections follow-up	CST11	Risk Based	Follow up of Partial Assurance audit in 2022/23	5	3

Hand Arm Vibration		Risk Based	To review compliance with the Vibration at Work Guidance	10	1
Hellaby Stores		Risk Based	To assess the adequacy of the internal control arrangements surrounding the operation of the stores at Hellaby depot	10	DRAFT
Total Planned Days – Regeneration and Environment				126	

<u>OTHER</u>	Provision	Used
Grants	100	17
Provision for investigations	150	17
Pro-active fraud	40	3
Contingency	60	30
Follow Up	20	0
Other Work Total	370	67
Overall Plan Total	1000	

Summary of Audit Work Completed since the last meeting

Note:- Internal Audit uses an Executive Summary and reporting structure which gives four levels of overall assurance for areas under examination. Within each area audited an overall assurance opinion is assessed as being either “Substantial Assurance”, Reasonable Assurance”, “Partial Assurance” or “No Assurance”, taking into account the results of all the risks assessed.

Audit Area	Assurance Objective	Final Report to man't	Overall Audit Opinion	Summary of Significant Issues
Assistant Chief Executive				
Communications	To provide assurance on the effectiveness of the media enquiries protocol.	25.5.23	Substantial Assurance	Controls were found to be in place. No recommendations were made.
Adult Care, Housing and Public Health				
Health and Safety Legislation and Corporate Responsibility for Council homes	To provide assurance on compliance with Social Landlord health and safety responsibilities for Council housing in respect of mould and damp, fire safety, asbestos and legionella.	23.5.23	Reasonable Assurance	Controls were generally in place. Recommendations were made around documentation, the recording of checks, monitoring and training.
Children and Young People’s Services				
Schools themed Audit	To provide assurance on three key areas identified from discussions and the CRSA	10.5.23	Reasonable Assurance	Controls were generally in place. Recommendations were made for all three areas. CYPS management agreed to send updates to all schools so that they could be actioned.

Audit Area	Assurance Objective	Final Report to man't	Overall Audit Opinion	Summary of Significant Issues
	returns – VAT & Taxation, Asset Management and Safeguarding.			
Joint Funding of Care Packages	To review the new Joint Funding Strategy and provide assurance on compliance with it.	26.5.23	Partial Assurance	Recommendations were made to improve the recording of care packages and care actions and provide training to staff.
Special Education Needs and Disability (SEND)	To review the progress in implementing the Written Statement Of Action relating to the SEND Local Offer	21.6.23	Substantial Assurance	The review found that all the actions had been completed or were on track. No recommendations were made.
Finance and Customer Services				
Council Tax Support	To review the changes in the Council tax Support system and provide assurance on compliance with it.	5.5.23	Substantial Assurance	Controls were in place. Two minor recommendations were made regarding documentation.
Insurance	To provide assurance that the Insurance Service is fulfilling its requirements to the Council	31.5.23	Reasonable Assurance	Controls were generally in place. Recommendations were made around the need for procedure notes and to improve checks on some claims.
Backup Management	To review the controls surrounding IT backups.	31.5.23	Substantial Assurance	Controls were in place. No recommendations were made.

Definitions

Rating	Definition
Substantial Assurance	<p>Substantial assurance that the system of internal control is designed to achieve the service's objectives and this minimises risk.</p> <p>The controls tested are being consistently and effectively applied. Recommendations, if any, are of an advisory nature (1 star) to further strengthen control arrangements.</p>
Reasonable Assurance	<p>Reasonable assurance that the system of internal control is designed to achieve the service's objectives and minimise risk. However, some weaknesses in the design or inconsistent application of controls put the achievement of some objectives at risk.</p> <p>There are some areas where controls are not consistently and effectively applied and / or are not sufficiently developed. Recommendations are no greater than medium (2 star) priority.</p>
Partial Assurance	<p>Partial assurance where weaknesses in the design or application of controls put the achievement of the service's objectives at risk in a significant proportion of the areas reviewed.</p> <p>There are significant numbers of areas where controls are not consistently and effectively applied and / or are not sufficiently developed. Recommendations may include high priority (3 star) and medium priority (2 star) matters.</p>
No Assurance	<p>Fundamental weaknesses have been identified in the system of internal control resulting in the control environment being unacceptably weak and this exposes service objectives to an unacceptable level of risk.</p> <p>There is significant non-compliance with basic controls which leaves the system open to error and / or abuse. Recommendations will include high priority (3 star) matters and may also include medium priority (2 star) matters.</p>

Internal Audit Performance Indicators

Performance Indicator	Target	April to June 2023
Draft reports issued within 15 working days of field work being completed.	90%	80%
Chargeable Time / Available Time.	80%	83%
Audits completed within planned time	90%	90%
Client Satisfaction Survey.	100%	100%

Comments received in the Client Satisfaction Surveys

Two surveys received during May and June.

Good

'Early face to face discussion about scope of audit with clear questions at the discovery stage. Auditor interacted with the service throughout and when officer help was needed the auditor fitted in with times that suited the service. This gave assurance that the service was constructively involved in the audit and not that the audit was being imposed on them.'

'The auditor was very professional and was very helpful in putting colleagues at ease. The consultation on the draft report was crucial to ensure recommendations were appropriate. I appreciated having the opportunity to review and feedback on the final report as updates could be fed into it before it was formally distributed.'

Improvement needed

None.