# 22022/23 Internal Audit Plan - Consultation

DIRECTORATE	NAME	TITLE	DATE
	Paul Hewitt	Corporate Strategic Board Interim Chief Executive	25/07/22 25/07/22
Resources	Charlie Stewart Dawn Calvert Hugh Peart Alex Dewsnap Ben Goward Fern Silverio Nimesh Mehta Sharon Daniels Tasleem Kazmi Donna Edwards Jessie Mann Jo Frost Justin Phillips Neale Burns Internal Audit Team Corporate Anti-Fraud Team	Corporate Director Resources Director of Finance & Assurance/S151 Director of Legal & Governance Director of Strategy and Partnership Director of ICT Divisional Director Collections & Benefits Head of Procurement Head of Strat & Tech Finance/Deputy S151 Finance Business Partner Housing & Regeneration Finance Business Partner People (Adults) Finance Business Partner People (Adults) Finance Business Partner People (Children) Corporate Anti-Fraud Service Manager Interim Risk Manager Auditors Fraud Investigators	25/07/22 18/07/22 25/07/22 18/07/22 18/07/22 18/07/22 18/07/22 18/07/22 18/07/22 18/07/22 18/07/22 24/06/22 24/06/22 24/06/22 24/06/22
People	Peter Tolley Shaun Riley Patrick O'Dwyer Johanna Morgan Sarah Baker	Interim Corporate Director People Interim Director of Adult Social Services Director of Education Divisional Director Commercial & Regeneration Assistant Director – Health & Wellbeing	18/07/22 18/07/22 18/07/22 18/07/22 19/07/22

Place	Dipti Patel	Corporate Director Place	18/07/22
	Tony Galloway	Interim Director Environmental Services	18/07/22
	Julian Wain	Interim Commercial Director	18/07/22
	Mark Billington	Head of Service – Economic Development, Research	18/07/22
		& Enterprise	
	Julian Higson	Interim Head of Housing	18/07/22
	Andrew Campion	Head of Asset Management (Housing)	18/07/22

# Internal Audit Plan 2022/23

Review Area	Risk Assessment	Reason for inclusion	Proposed Audit Coverage	Audit Days	Q
		Core Financial Sys	tems		
Capital expenditure	H	Core Financial System	Key Control Review	10	Q1
Business Rates	Н	Core Financial System	Key Control Review	10	Q1
Housing Benefit	Н	Core Financial System	Evidence Based Control Self- Assessment	1.5	Q1
Treasury Management	M	Core Financial System	Evidence Based Control Self- Assessment	1.5	Q1
Housing Rents	М	Core Financial System	Evidence Based Control Self–Assessment	3	Q1
Corporate Accounts Receivable	M	Core Financial System	Evidence Based Control Self- Assessment	1.5	Q1
Corporate Accounts Payable	Н	Core Financial System	Evidence Based Control Self- Assessment	1.5	Q1
Payroll	Н	Core Financial System	Evidence Based Control Self- Assessment	1.5	Q1
Council Tax	Н	Core Financial System	Evidence Based Control Self- Assessment	1.5	Q1
		IT			
IT Inventory*	Н	As a result of Pandemic IT equipment is has been distributed for homeworking.	A review to ensure that inventory covers all appropriate equipment, and that adequate systems are in place for keeping it up to date.	10	Q2
IT Support – Service Integration and Management*	Н	New arrangements in place, some in-house provision and some contracts	A review of how the elements of the support work together and are being managed	20	Q3/4
IT Strategy*	Н	New IT Strategy currently being developed	Provision of the 2016/17 audit work on IT Strategy to feed into the development of the new strategy and a review of new strategy towards the end of the year	5	Q4

<sup>&</sup>lt;sup>1</sup> Wherever possible risk ratings are taken from the Corporate (prefix CR), an audit risk assessment is undertaken for all other reviews. \* Projects carried forward from 2021/22 plan

		Corporate Compliance	Checks		
Contract Procedure Rules (Annual Assurance)	Н	To obtain assurance and to feed into future updating of Contract Procedure Rules and following the findings of the Depot – Additional Works Review	Sample checks across the council to ensure that Contract Procedure Rules are understood and being adhered to – area of focus to be determined as part of review planning	10	Q3/4
Financial Regulations (Annual Assurance)	H	To obtain assurance following the updating of Financial Regulations during 18/19 and the findings of the Depot – Additional Works Review	Sample checks across the council to ensure that Financial Regulations are understood and being adhered to – area of focus to be determined as part of review planning	10	Q3/4
HR Policies (Annual Assurance)	H	To provide assurance on the implementation of HR Policies annually, with a focus on different policies each year in consultation with the Director of HR&OD	Sample check across the council to ensure that HR Policies are understood and adhered to - areas of focus for 201/22 Job Evaluation and Honorariums	10	Q2
		Corporate Risk Based/Goveri	nance Reviews		
Corporate Governance	Statutory Requirement Links to CR2 - H	<b>Requirement under the Accounts</b> <b>&amp; Audit Regulations 2015:</b> <i>A</i> relevant authority must, each year conduct a review of the effectiveness of the system of internal control and prepare an annual governance statement	Co-ordination of the annual review of governance, including Management Assurance, assessment against the CIPFA Financial Management Standards plus drafting of the Annual Governance Statement	30	Q1/4
Risk Registers	Statutory Requirement	<b>Requirement under the Accounts</b> <b>&amp; Audit Regulations 2015:</b> <i>A</i> <i>relevant authority must ensure that</i> <i>it has a sound system of internal</i> <i>control which includes effective</i> <i>arrangements for the management</i> <i>of risk</i>	Update of the Corporate Risk Register and input/assistance with Directorate and other Council risk registers	65	Q1-4
Risk Management in Decision Making	М	<b>Requirement under the Accounts</b> & Audit Regulations 2015: <i>A</i> relevant authority must ensure that it has a sound system of internal control which includes effective arrangements for the management of risk	A real-time pro-active review, with clearance provided before reports are presented to Cabinet	20	Q1- Q4

Tell Us Once/Legacy	Н	Changes of circumstances notified	A review to identify the barriers to information	10	Q3/4
Systems*		to the Council are not always	being shared across key services, Housing,		
		shared with appropriate services	Council Tax and Housing Benefits and the Tell		
		and this has led to overpayments	Us Once system and an exploration of potential		
		and fraud.	solutions		
Financial Resilience*	Links to CR1	Financial Resilience is key to the	Using CIPFA publication Building Financial	15	Q3/4
	- H	authority remaining viable, stable	Resilience as a guide a review of the authority's		
		and effective in a climate of growing	financial resilience		
		demand and reduced funding			
		Resources Risk Based	Reviews		
Restart Grants*	H	Scheme in place to support	Post assurance review conducted jointly with	10	Q2
		business in the non-essential retail,	Corporate Anti-Fraud Team to ensure that any		
		hospitality, leisure, personal care	suspected fraud or error identified can be		
		and accommodation sectors with a	investigated quickly and steps taken to recover		
		one-off grant of up to £18,000, to	any losses identified		
		reopen safely as COVID-19			
		restrictions are lifted			
Transformation Programme	CR7 - H	A continuation of project	A project management review of one of the	15	Q3/4
- Project Management		management reviews of the	projects within the Transformation Programme –		
Review*		Council's key projects	project to be identified at time of review		
Resources Directorate	CR10 - M	In response to an external report	Development of a Resources Directorate Fraud	20	Q2-4
Fraud Risk		and a significant fraud identified in	Risk for inclusion on the Resources Directorate		
		2021/22	Risk Register and a targeted review of controls		
			in place to mitigate the risk of fraud.		
		Place Risk Based Re			
Housing Repairs*	H	The Council as a landlord has a	A review of the adequacy, application, and	25	Q3/4
(expanded for 2022/23)		number of statutory duties that	effectiveness of controls in place to mitigate		
,		must be complied with	risks to the Council including the risk of fraud		
		· ·	and failure to comply with the Council's statutory		
			duties		
Facilities Management	Н	Major changes introduced during	Review of procurement and contract	15	Q3/4
Procurement/Contracts*		2020/21 to improve service	management		
Facilities Management	Н	There are a number of statutory	A review of the processes in place to ensure that	15	Q2
Statutory Compliance*		duties that must be complied with	the Council's statutory duties are met		
Bus Subsidy Grant*	Statutory	Grant condition requirement	Annual HIA Certification	2	Q2
-	Requirement				

HSDP/Council owned companies Governance*	CR4 – H	New arrangements, issues highlighted in other authorities with such arrangement, potential high risks	A review of how governance arrangements are working in practice across Council owned companies Q3/Q4	20	Q3/ Q4
Leaseholder Charges	H	In response a complaint it was agreed with the Chief Executive that an internal audit of the process would be undertaken before ethe next billing cycle	A review of the adequacy, application and effectiveness of controls in place to mitigate risk to the Council, including the risk inaccurate charging of in the Leaseholder Charges system	20	Q2/3
Place Directorate Fraud Risk	CR10 - M	In response to an external report and a significant fraud identified in 2021/22	Development of a Place Directorate Fraud Risk for inclusion on the Place Directorate Risk Register and a targeted review of controls in place to mitigate the risk of fraud.	30	Q2-4
		People Risk Based R			-1
Schools	H	Links to Corporate Priority: Sustaining quality education and training The Council has 34 maintained schools with delegated budgets most of which are in excess of £1m however schools are facing ever increasing financial pressures	Reviews to be undertaken to provide assurance on Budget Management or Governance & Financial Control. Schools that decide to leave the FMS system will be considered a higher risk and will be prioritised.	80	Q3/4
SFVS	Funding Requirement	To provide assurance to S151 Officer responsible for signing off statutory return	Review of the statutory return to the Department Education to be signed by the s151 Officer confirming the number of Schools to complete the Schools Financial Value Standard (SFVS) self-assessment	5	Q1
Together with Families Programme (Troubled Families Grant)	Grant Requirement	Links to Corporate Priority: Tackling poverty and inequality - testing by internal audit is a grant condition	Sample testing of claim prior to grant submission	10	Q1-4
Children Placements*	Links to CR5 - H	A high percentage of the Children Budget spent on placements	A review of the adequacy, application and effectiveness of decisions and review of placements	15	Q3/4
Adults Placements*	Links to CR3 & CR5 - H	A high percentage of the Adults Budget spent on placements	A review of the adequacy, application and effectiveness of decisions and review of placements	15	Q3/4

People Directorate Fraud	CR10 - M	In response to an external report	Development of a People Directorate Fraud Risk	20	Q2-4
Risk		and a significant fraud identified in	for inclusion on the People Directorate Risk		
		2021/22	Register and a targeted review of controls in		
			place to mitigate the risk of fraud.		
		Support, Advice & Fo	llow-up		
GARMS Identified Review	tbd	tbd	tbd	20	tbd
Professional Advice	H/M/L	To provide a pro-active response to	Advice on control, risk management and	20	Q1-4
		management requests for support	governance		
		and guidance on control, risk			
		management and guidance			
Follow-up	H/M	To provide assurance on the implementation of audit recommendations by management	Follow-up of Red, Red/Amber & Amber reports	20	Q1-4
		in accordance with the agreed strategy			
Grants	Н	Certain government grants require HIA sign-off	Where required sample testing to confirm grant conditions have been met before sign-ff by the HIA and Chief Executive	5	Q1-4
Irregularity/whistleblowing Reviews	Н	To provide a pro-active response to irregularity and/or whistleblowing allegations	Review of allegations to support management	50	Q1-4
TOTAL DAYS IN 2022/23 PL	AN			684	

	Internal Audit Performance Indicator 2022/23	Target
1	Recommendations agreed for implementation	95%
2	Follow up undertaken – red and red/amber assurance reviews	100%
3	Follow-up undertaken – amber assurance reviews	70%
4	Plan achieved for key control reviews	100%
5	Plan achieved overall (key indicator)	90%
	Corporate Performance Indicator	Target
1	Implementation of recommendations	90%

# Corporate Anti-Fraud Plan 2022/23

	Fraud work stream	Proposed counter fraud coverage
1.	Corporate fraud risk assessment	Identify and assess Harrow's fraud risk exposure affecting the principal activities in order to fully understand changing patterns in fraud and corruption threats and the potential harmful consequences to the authority and our customers. A new methodology was deployed in 2021/22 which will be reviewed at the end of the year to assess how accurate it was.
2.	Corporate Anti-Fraud & Corruption Strategy	Review the authorities' Corporate Anti-Fraud & Corruption Strategy and update any action plan in year
3.	National Fraud Initiative co-ordination role	<ul> <li>Co-ordination of the 2022/23 National Fraud Initiative (NFI) match processing including:-</li> <li>Ensuring the authority complies with fair processing guidelines required to submit data into the exercise in accordance with timescales so as to be compliant with GDP</li> <li>Supports service areas in extracting the data from core systems in the required specification in accordance with timescales</li> <li>Upload the data securely onto the Cabinet Office NFI portal and in accordance with timescales</li> <li>Liaise with service areas when the datamatches are released back to authority in January 2019 to ensure that action is commenced promptly on those matches that are deemed to be high risk</li> </ul>
4.	Cifas project	Continue to maximise membership of Cifas to support fraud investigation work undertaking a proactive drive using the National Fraud Database (NFD)
5.	Cifas Employee Vetting Project	Implement employee vetting using the Cifas Enhanced Internal Fraud Database (EIFD) for new starter agency staff in phase 1 (Q2) and new starter and promotions for permanent staff in phase 2 (Q4)
6.	Corporate anti-fraud awareness	Raise awareness of fraud and corruption risks both within the authority and in the community through the publication of fraud successes and awareness internally and in local and national media, including the use of all forms of social media including the following actions:-

		<ul> <li>Facilitate with organizational development the roll out of mandatory fraud e-learning during the year in response to the significant governance gap identified in 2021/22</li> <li>General fraud communication bulletins in relation to articles on fraud and corruption, case studies</li> <li>Issuing management reports detailing investigation outcomes and recommendations for improving fraud risk controls are implemented (KPI5)</li> </ul>
		• In partnership with Internal Audit deliver fraud workshops/attendance at team meetings for areas identified as particularly vulnerable to fraud in response to the significant governance gap identified in 2021/22
		Publicity through all forms of media on successful fraud cases, fraud initiatives and related prosecution outcomes
		• The use of Yammer to promote fraud awareness and signpost to the e-learning package
7.	Fraud liaison	Explore, develop and maintain effective liaison with investigation teams in other boroughs and external agencies and ensure that membership and interest continues in the London Borough of Fraud Investigators Group (LBFIG), The National Anti-Fraud Network (NAFN), The Chartered Institute of Public Finance and Accountancy (CIPFA) and Cifas
8.	Challenging Organised Crime Groups (OCGs) project	Explore a proof of concept to identify and investigate OCGs in partnership with the Department for Business, Energy & Industrial Strategy (BEIS), University of the West of England & Synalogik Innovative Solutions
9.	Housing fraud	Assess and investigate allegations of fraud and abuse in the housing system working in partnership with Housing Resident Services, Housing Needs and Harrow's RSL's including:
		• Seek to recover a combined total of 10 Council social housing units and disrupt/intercept fraudulent Right to Buy applications (KPI1)
		• Prevent housing application fraud through a partnership approach with Housing Needs providing fraud risk advice, support and the investigation of allegations of fraud

		• Prevent fraudulent Right to Buy (RTB) applications through targeted application validation with a fraud check on at least 90% applications referred to the CAFT at offer stage and before completion (KPI2)
		• Maximise the use of powers contained within the Prevention of Social Housing Fraud Act 2013 (PoSHFA) in terms of gathering evidence, investigation and prosecution of offenders and recovery of unlawful profit
		• Plan and implement a proactive anti-fraud datamatching exercise to identify the misuse of Council social housing units (see datamatching section above)
10.	Social care fraud	Work in partnership with the People Directorate to undertake a sample check allegations of fraud and abuse of the social care system including but not limited to:-
		<ul> <li>A proactive fraud risk based exercise of personal budgets applications, assessment and monitoring of spend</li> </ul>
		A proactive fraud risk based exercise in relation to those individuals being financially supported in long term residential care
11.	Risk assess allegations of internal fraud and corruption	Risk assess 85% of allegations of fraud and corruption and deploy resources on those cases deemed sufficiently high enough fraud risk within an average of 5 working days of receipt of the information (KPI3)
12.	Risk assess allegations of fraud and corruption	Risk assess 85% of allegations of fraud and corruption and deploy resources on those cases deemed sufficiently high enough fraud risk within an average of 10 working days of receipt of the information (KPI4)

No.	CAFT Key Performance Indicators 2022/23	Target
1.	Seek to recover a combined total of 10 Council social housing units and disrupt/intercept fraudulent Right to Buy applications	100%
2.	Fraud validation checks commenced on Right to Buy applications and resources deployed in 10 working days with 100% check before purchase completion	90%
3.	Internal fraud and corruption referrals risk assessed and resources deployed in 5 working days	85%
4.	Fraud and corruption referrals risk assessed and resources deployed in 10 working days	85%
5.	Fraud risk recommendations agreed for implementation	85%

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July 2022