**APPENDIX 1** 

#### **KEY**

RED assurance = 0-50% controls operating (O)/substantially operating (SO)

RED/AMBER assurance = 51-60% controls operating/substantially operating

AMBER assurance = 61-70% controls operating/substantially operating

AMBER/GREEN assurance = 71-80% controls operating/substantially operating

GREEN assurance = 81-100% controls operating/substantially operating

(D) = Assurance ratings that have been downgraded due to the high number of high risk recommendations made (with the agreement of the Head of Internal Audit)

### **Mid-year Results**

1. Table 1 below details all the reports issued in Q1/Q2 of 2015/16 from the 2014/15 audit plan with the report assurance rating.

### Table 1 - 2014/15 Plan Reports Issued in Q1&2 of 2015/16

| Review                            | Audit Coverage                                     | Assurance Rating |        | Follow-up Due           |
|-----------------------------------|--|------------------|--------|-------------------------|
|                                   |  |                  |        |                         |
| Business Continuity & IT Disaster | A review of controls over the arrangements that    | RED              | AMBER  | January 2016. 23        |
| Recovery                          | are in place for the prevention of system          | 20% O            | 42% SO | recommendations         |
|                                   | downtime through adequate resilience.              |                  | (D)    | made, 19 high risk, all |
|                                   |  |                  |        | agreed for              |
|                                   |  |                  |        | implementation.         |
| Council Tax Discounts             | A review of the controls in place to prevent fraud | AME              | BER    | December 2015. 4        |
|                                   | within Council Tax Discounts for single persons'   | 56 % O           | 11% SO | recommendations         |
|                                   | discounts, student discounts and disabled band     |                  |        | made, 1 high risk, all  |
|                                   | reductions.  |                  |        | agreed for              |
|                                   |  |                  |        | implementation.         |

#### **APPENDIX 1**

| Review  | Audit Coverage  | Assurance Rating   | Follow-up Due   |
|---|---|--|---|
| Highways Contract Management  | To ensure robust monitoring systems are in place, the services obtained are as agreed in the contracts and value for money is achieved. Furthermore to ensure the efficiency, effectiveness and economy of the services is optimised. | GREEN<br>97% O   | None required. 1<br>medium risk<br>recommendation<br>made and agreed for<br>implementation. |
| Whitchurch Junior School<br>Investigation – 2 <sup>nd</sup> Follow-up | Initial follow-up (Dec 14) assurance improved from red to red/amber. Therefore 2 <sup>nd</sup> follow-up undertaken (July 15).  | GREEN 74% Recs fully implemented 19% Substantially implemented | No further follow-up<br>required  |
| Data Centre Landlord Risks<br>Review                                  | Review of the environment and physical security controls over the IT data centre which support Harrow Council's core IT infrastructure and systems.   | RED<br>7% O  | January 2016  |

2. Table 2 below details the completed assurance report reviews issued in Q1/Q2 of 2015/16 from the 2015/16 Plan and the assurance rating.

Table 2 – 2015/16 Plan Completed Assurance Report Reviews in Q1/Q2 of 2015/16

| Review        | Audit Coverage                    | ASSURANCE RATING     | Follow-up Due   |
|---------------|-----------------------------------|----------------------|---|
| Housing Rents | Key Control Review + system notes | GREEN<br>86% O 11%SO | None required. 4 recommendations made, none high risk, all agreed for implementation. |

#### **APPENDIX 1**

| Corporate Accounts Payable    | Key Control Review + system notes | 94% O recommendation agreed for  |  | April 2016. 1 high risk recommendation agreed for implementation.               |
|-------------------------------|-----------------------------------|--|--|---|
| Corporate Accounts Receivable | Key Control Review + system notes | GREEN 88% O 4% SO  Mone required. medium risk recommendation made and agre |  | None required. I medium risk recommendation made and agreed for implementation. |

3. Table 3 below details the completed assurance non report reviews undertaken in Q1/Q2 of 2015/16 from the 201516 Plan.

Table 3 – 2015/16 Plan Completed Assurance Non Report Reviews/work in Q1/Q2 of 2015/16

| Review                                       | Audit Coverage   | Comments                   |
|--|--|----------------------------|
| Payroll                                      | System notes, walkthrough. CRSA  | Complete – GREEN assurance |
| Treasury Management                          | System notes, walkthrough. CRSA  | Complete – GREEN assurance |
| Council Tax                                  | System notes, walkthrough. CRSA  | Complete – GREEN assurance |
| Capital Expenditure                          | System notes, walkthrough. CRSA  | Complete – GREEN assurance |
| NDR  | System notes, walkthrough. CRSA  | Complete – GREEN assurance |
| Housing Benefits                             | System notes, walkthrough. CRSA  | Complete – GREEN assurance |
| Corporate Governance                         | Annual Governance review, drafting AGS, AGS Action Plan  | Complete to end of Q2      |
| Information Governance Board (IGB)           | To ensure that the Council has effective polices & management arrangements covering Information Governance | Complete to end of Q2      |
| Bus Subsidy Grant                            | Audit and sign-off of claim  | Complete                   |
| Suspected Financial Irregularities + Control | 40 Laptops stolen - see CAFT report  | Complete to end of Q2      |

#### **APPENDIX 1**

| Reviews                     | <ul> <li>School Purchase Card misuse – advice to<br/>Headteacher on investigation</li> <li>Public Health Income – in- adequate record keeping by<br/>officer no longer working for Council</li> </ul> |                       |
|-----------------------------|---|-----------------------|
| Professional Advice         | Advice on risk mitigation & control   | Complete to end of Q2 |
| Liaison with External Audit | On-going liaison throughout the year  | Complete to end of Q2 |
| Audit Management            | e.g. planning, GARM reporting   | Complete to end of Q2 |

### **Internal Audit Performance Indicators**

4. Table 4 below outlines the seven Internal Audit indicators agreed for the year, including the key indicator covering achievement of the IA annual plan. These indicators cover performance on projects from the 2014/15 plan and the 2015/16 plan issued in the first half of the year (i.e. up to 30/09/14).

### Table 4 - Internal Audit Performance Indicator Results

|   | Performance Indicator                                       | Target | Mid<br>Year<br>Result |
|---|---|--------|-----------------------|
| 1 | Recommendations agreed for implementation                   | 95%    | 100%                  |
| 2 | Final reports issued on / ahead of time                     | 85%    | 100%                  |
| 3 | Projects completed within budgeted time allowance           | 85%    | 70%                   |
| 4 | Target met for issue of draft report after end of fieldwork | 85%    | 100%                  |
| 5 | Follow up undertaken  | 100%   | 0%                    |
| 6 | Plan achieved for key control reviews                       | 100%   | 100%                  |
| 7 | Plan achieved overall (key indicator)                       | 37%    | 48%                   |

### **Analysis of Results**

5. Overall 4 (57%) of the performance targets have been met or exceeded. Three (43%) of the performance targets have been exceeded, 1 (14%) has been fully met.

**APPENDIX 1** 

- 6. Three (43%) targets were not met. All of these are a direct result of reduced Internal Audit resources. Target 3 projects completed within budgeted timescale has not been met due to a decision during the development of the audit plan to minimise audit days wherever possible resulting in fewer targets being met; Target 5 follows ups were suspended in the first half of the year to enable the reduced team to concentrate on reviews required to be completed in the first half of the year i.e. core financial systems and the annual governance review; Target 7 plan achieved, whilst 11% lower than the target was achieved with 33% reduced resources.
- 7. In the second half of the year target 5 and 7 are expected to improve as a seconded member of the team is returning and will be tasked with completing follow-ups and PwC will be undertaking a number of IT audit reviews.

### **Corporate Performance Indicators Results**

8. Insufficient data has been collected to enable reporting on the Corporate Indicators for the first half of the year as data is collected for these during follow-up i.e. actual number of audit recommendations implemented and auditee response times. These will be reported for the full year in the year-end report.

### **Quarter Three Update**

9. Table 5 below details the reviews completed in Q3 2015/16.

### Table 5 –2015/16 Plan Completed Assurance Report Reviews in Q3 of 2015/16

| Review               | Audit Coverage  | ASSURANCE RATING | Follow-up Due |
|----------------------|---|------------------|---------------|
| Leaseholders Charges | To review the adequacy, application and efficiency of the processes in place to ensure that leaseholder service charges are accurate and correctly accounted for. | AMBER<br>61% O   | April 2016    |

#### **APPENDIX 1**

| Freedom of Information | To review the policy and process employed by    | AMBER        | April 2016 |
|------------------------|---|--------------|------------|
|                        | the Council for dealing with Freedom of         | 31% O 38% SO |            |
|                        | Information requests to ensure that they are    |              |            |
|                        | appropriate and proportionate. This was a joint |              |            |
|                        | review with the Lean team.                      |              |            |

10. Table 6 below details the reviews in progress during Q3 2015/16

## Table 6 –2015/16 Plan Reviews in Progress in Q3 of 2015/16

| Review                             | Audit Coverage   | Progress   |
|------------------------------------|--|--|
| SIMS Personnel                     | C/f from 2014/15 plan. To ensure robust controls are in place in schools for the accuracy of the processing of Payroll through the SIMS Personnel system and to prevent or detect fraud. | 4 school visit complete – summary of findings and conclusions to be drafted.   |
| Stanburn Primary School            |  | Draft report issued and 1st response to recommendations received but need more information/ detail to finalise report (new HT in place). Significant changes in the school and they have been seeking advice on various matters. |
| Whitchurch First - SFI             | C/f from 2014/14   | Witness statement and evidence for NCTL being prepared (hearing due sometime between March and Sept 2016)  |
| Schools HR Policies and Procedures |  | 2 schools visited out of 4 – 2 others booked but cancelled because of Planning Enf SFI and now being rebooked.   |

#### **APPENDIX 1**

| Planning Enforcement SFI                  | Investigation of corruption allegations against a Planning Enforcement Officer undertaken jointly by Internal Audit and Corporate Fraud – no evidence of corruption found however a number of recommendations made to improve system/process. | Draft report issued.         |
|---|---|------------------------------|
| Blocked Invoices                          | Identification/elimination of causes  | Fieldwork ongoing            |
| Fixed Assets                              | Ensure records on Northgate (Dwellings & Garages) and on SAP (Shops & Community Halls) are up to date and accurate  | Fieldwork ongoing            |
| Mandate Fraud Risk                        | A review of controls in place to prevent fraud  | Planning in progress         |
| School whistleblowing investigation - SFI | An investigation into recruitment practices and use of special needs funding following a whistleblowing allegation.   | Fieldwork ongoing            |
| HSIP                                      | To confirm HSIP's status and to ensure that there is transparency in financial balances and the income and expenditure accounts including compliance with Council policy and procedures   | Testing                      |
| Tenancy Changes                           | To ensure appropriate checks undertaken when there is a change of tenancy   | Preparing draft report       |
| Procurement Fraud                         | Assessing risk of procurement fraud and preventative controls in place  | Draft report awaiting review |
| Right to Buy                              | A review of controls in place to prevent fraud  | Draft report awaiting review |
| CIPFA Fraud Code                          | Self –assessment against code   | On-going                     |

## 11. Table 7 below shows work on the 2015/16 Plan not yet started that will be carried out in Q4 2015/16

| Review          | Audit Coverage  |
|-----------------|---|
| Risk Management | Maintenance and update of Corporate Risk Registers + Corporate Risk Appetite Statement – external expertise being brought in. |
| Follow-ups      | Standard follow-ups of Red, Red/Amber & Amber reports – to be undertaken by Assistant Auditor returning from secondment.      |

#### **APPENDIX 1**

| Debt Management                | To ensure that a joined up corporate approach is taken to debt management – to be undertaken by PwC |  |
|--------------------------------|---|--|
| Northgate Housing Repairs –    | Covering access controls, data entry, processing, output, interfaces, back-up and recovery – to be  |  |
| Application Review             | undertaken by PwC   |  |
| SAP                            | Targeted review of parameters – to be undertaken by PwC   |  |
| IT Change Management           | Review of system in place to manage IT change – to be undertaken by PwC                             |  |
| E-invoicing                    | Post implementation review  |  |
| Public Health Checks Follow-up | Follow-up of Audit Briefing note issued 2013/14   |  |
| Audit Plan 2016/17             | Consultation on and risk assessment of reviews to be included in the 2016/17 annual audit plan.     |  |

## 12. Table 8 below shows reviews that have been added or extended in the 2015/16 plan

### Table 8 - Additional/Extended reviews in the 2015/16 Plan

| Review                   | Reason Added/Extended  |  |
|--------------------------|--|--|
| Corporate Governance     | New Governance Framework guidance about to be issued by CIPFA, Harrow Code of Corporate Governance to be reviewed and updated in line with new guidance for 2016/17 plus accounts deadline being brought forward requires governance review to be started in Q4 2015/16 instead of Q1 2016/17. |  |
| Risk Management          | Review & update of policy & procedures which are out of date – to make best use of expertise being employed.   |  |
| HSIP                     | Concerns raised by management – emerging risk  |  |
| Families First           | Change in the grant conditions requires a more active Internal Audit involvement.  |  |
| IT Data Centre Follow-up | Due to the complex nature and profile of the review a more detailed follow-up is required.   |  |
| BC& IT DR Follow-up      | Due to the complex nature and profile of the review a more detailed follow-up is required.   |  |
| Peer Review              | We are required to have an external assessment against the PSIAS once every five years – London Boroughs have agreed to undertake peer reviews to achieve this at minimum cost. HIA to undertake peer review of Croydon in February 2016.  |  |
| Schools HR Policies and  | Div Dir of HR & Shared Services has also sought advice/ audit perspective on which schools policies  |  |

#### **APPENDIX 1**

| Procedures             | have the highest priority for update. Preparing some advice on this. |
|------------------------|--|
| IT Contract Management | Pro-active element of proposed 2016/17 review.                       |

- 13. This equates to an estimated 72 extra audit days.
- 14. Table 9 below shows reviews in the 2015/16 Plan that will no longer be undertaken

Table 9 – Reviews in 2015/16 Plan no longer to be undertaken

| Review  | Audit Coverage   | Reason Omitted                                       |
|---|--|--|
| Help2Let                                      | Risk based systems review.   | Resource constraint                                  |
| Cabinet Decisions                             | A review of the quality/robustness of information supplied in Cabinet reports to support key recommendations and ensure sound decisions. | Resource constraint                                  |
| Income Maximisation (incl. Trading Standards) | A check to ensure that Council is charging for everything it current should be charging for ahead of commercialisation                   | Resource constraint                                  |
| Project Assurance/Management                  | Input to process for new construction delivery unit  | New construction delivery unit no longer going ahead |
| Legal Services Company                        | Review of governance, income and accounting arrangements   | Resource constraint                                  |
| Pertemps Contract                             | Contract Management (inc. goods receipting)  | Resource constraint                                  |
| MyCep - PayPal, Claw Back of Surpluses        | To ensure adequacy, application and effectiveness of controls in place for commercialisation   | Resource constraint                                  |
| Cash Payments                                 | Review of cash payments made to identify alternative suitable methods where possible   | Dealt with by management                             |
| Headteachers' Remuneration                    | Review of Headteachers' Remuneration across the borough  | Resource constraint                                  |
| Schools Expansion Programme                   |  | Resource constraint                                  |
| Phase 3                                       | Programme Management Assurance   |  |

#### APPENDIX 1

| Trade Waste          | Assurance re progress made to improve processes and reduce fraud risk                                | Resource constraint |
|----------------------|--|---------------------|
| Grants               | Compliance check on grant conditions   | Resource constraint |
| HR Self-service      | Review of the controls in place to ensure changes to payment details are not open to fraud and error | Resource constraint |
| Homelessness Data on | Information Security, data quality, information  | Resource constraint |
| Northgate            | sharing  |                     |

- This equates to 165 audit days taken out of the original 2015/16 plan. However as 72 audit days have been added in (Table 8 15. above) overall this equates to a reduction of 97 audit days which is equivalent to 54% of 1 x FTE<sup>1</sup>. Overall, due to maternity leave and a secondment<sup>2</sup> the team resources for 2015/16 were reduced by 315 audit days (35% of original plan days). The budget for these posts (less maternity pay) has been used to purchase external audit and risk days however this is more expensive than in-house resources hence the need to reduce the overall plan by 97 audit days which equates to an 11% reduction of the original plan of 902 audit days.
- 16. Reviews taken out of the 2015/16 plan will automatically be considered for inclusion in the 2016/17 audit plan.

Susan Dixson Head of Internal Audit 13/01/16

 <sup>1 1</sup> x Full Time Equivalent = 180 audit days
 2 1 x 180 audit days + 1 x 135 audit days = 315 audit days