#### HIGH PEAK BOROUGH COUNCIL

## **Report to Audit & Regulatory Committee**

## 14th February 2018

TITLE: 2017/18 Internal Audit Periodic Report

September 2017 to January 2018

**EXECUTIVE COUNCILLOR:** Councillor Emily Thrane – Executive

**Councillor for Finance & Corporate Services** 

CONTACT OFFICER: John Leak – Internal Audit Manager

WARDS INVOLVED: Non-Specific

Appendices Attached - Appendix 1 Audit Reports Issued Between 1st

September 2017 and 31<sup>st</sup> January 2018

Appendix 2 Internal Audit 2017/18 Progress Information

as at 31<sup>st</sup> January 2018

Appendix 3 2016/17 Audit Recommendations

<u>Implementation</u>

#### 1. Reason for the Report:

1.1 The Accounts and Audit Regulations 2015 requires the Council to "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". In accordance with the Public Sector Internal Audit Standards, the Audit Manager must report periodically to the Audit Committee on the internal audit activity's performance relative to its plan.

#### 2. Recommendation

2.1 That the committee note the progress information contained within this report.

#### 3. **Executive Summary**

3.1 The purpose of this report is to summarise current year performance information for the Council's Internal Audit service for the 2017/18 financial year. This includes a breakdown of audits in progress and

- completed to date, the number and classification of recommendations made, agreed and where applicable, implemented by management.
- 3.2 All audit recommendations have been agreed, and to date 100% of 2017/18 audit recommendations that are due have been implemented. Where deficiencies in internal control have been identified and not corrected, Internal Audit are satisfied that they will be resolved in an appropriate manner and they will continue to monitor such cases. It should be noted that it is the responsibility of relevant Managers to implement agreed recommendations.

## 4. How this report links to Corporate Priorities

4.1 The assurance provided by the work of Internal Audit informs the Annual Governance Statement and therefore helps to confirm effective use of financial and other resources to ensure value for money.

# 5. **Options and Analysis**

5.1 There are no options to consider.

#### 6. **Implications**

6.1 Community Safety - (Crime and Disorder Act 1998)

None.

6.2 Workforce

None.

6.3 Equality and Diversity/Equality Impact Assessment

This report has been prepared in accordance with the Council's Diversity and Equality Policies.

6.4 Financial Considerations

None.

6.5 Legal

None.

6.6 Sustainability

None.

6.7 <u>Internal and External Consultation</u>

None.

6.8 Risk Assessment

None.

# ANDREW P STOKES <u>Executive Director (Transformation) & Chief Finance Officer</u>

Web Links and Location Contact details

Background Papers

None N/A John Leak

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#### 7. Background and Detail

#### 7.1 Introduction

- 7.1.1 The purpose of this report is to summarise current year performance information for the Council's Internal Audit service for the 2017/18 financial year. This includes a breakdown of audits in progress and completed to date, the number and classification of recommendations made, agreed and where applicable, implemented by management.
- 7.1.2 The work of the internal audit service is primarily based upon an annual risk assessed audit plan, which for the financial year 2017/18 was agreed by this Committee at the 18<sup>th</sup> May 2017 meeting. The Internal Audit service also carry out work outside of the audit plan for which a contingency is usually built in. This unplanned work consists mainly of internal control consultancy work and special investigations into suspected fraud and irregularity.

### 7.2 Audits Reports Issued & Status of Agreed Recommendations

7.2.1 A summary of the Audit Reports issued during the period 1<sup>st</sup> September 2017 to 31<sup>st</sup> January 2018 is shown in the table below. Further details of these audits outlining key issues and strengths and improvements are shown in **Appendix 1**.

Service	Audit	Recommendations			Assurance
		High Risk	Medium Risk	Low Risk	
Environmental Services	Land Charges	0	0	5	Satisfactory
Development Services / Regeneration	Conservation Grants	0	0	5	Satisfactory
Operational Services	Horticulture	0	3	6	Satisfactory
Assets	Capital Contract Management & Housing Contracts	0	1	6	Satisfactory
Democratic & Community Services	Safeguarding Children & Vulnerable Adults	0	3	12	Satisfactory
Legal & Election Services	Elections	0	3	15	Satisfactory
Regeneration	Planning Policy	0	0	4	Substantial

Service	Audit	Recommendations			Assurance
		High Risk	Medium Risk	Low Risk	
Customer Services	Housing Advice	0	2	7	Satisfactory
Executive Director (People)	Data Protection & Information Governance	0	4	11	Satisfactory
Finance & Procurement	Treasury Management	0	0	1	Substantial

- 7.2.2 A further breakdown of all of the audits in progress and completed during the current financial year including the current status of audit recommendations is detailed in **Appendix 2**. All audit recommendations have been agreed, and to date 100% of 2017/18 audit recommendations that are due have been implemented. Where deficiencies in internal control have been identified and not corrected, Internal Audit are satisfied that they will be resolved in an appropriate manner and they will continue to monitor such cases. It should be noted that it is the responsibility of relevant Managers to implement agreed recommendations.
- 7.2.3 Councillors will note that in addition to every individual audit recommendation being allocated a risk, every audit completed has been given an 'assurance opinion' based upon Internal Audit's assessment of the internal control environment. These assurance opinions inform the annual audit opinion on the overall adequacy and effectiveness of the Council's internal control environment. The control levels are defined as follows:

Control Level	Definition
Substantial	There is a robust framework of controls designed to achieve
	the objectives and controls are consistently applied.
Satisfactory	There is a sufficient framework of controls which for the most part, are consistently applied. However, weakness in the design or inconsistent application of controls within a few areas put achievement of particular objectives at risk.
Limited	Weaknesses in the system or the level of non compliance with controls in a number of areas are such to put the system objectives at risk.
Unsatisfactory	There is a significant breakdown in the framework of controls, which leaves the system open to significant abuse or error.

- 7.2.4 **Appendix 3** is a summary of recommendations made in the previous financial year 2016/17 implemented to date. This information will keep Councillors informed of progress made to ensure that all previous year audit recommendations are implemented. Due dates for implementation of some previous year recommendations will fall into 2017/18 and beyond depending on when the audit was carried out so this appendix will show when those recommendations become due for implementation. In due course, all recommendations will fall due and it will be possible to clearly identify which recommendations have not been implemented.
- 7.2.5 To date 90% of 2016/17 audit recommendations that are due have been implemented. Where deficiencies in internal control have been identified and not corrected, Internal Audit are satisfied that they will be resolved in an appropriate manner and they will continue to monitor such cases. It should be noted that it is the responsibility of relevant Managers to implement agreed recommendations.

# 7.3 Audits In Progress

7.3.1 The status of audits that are currently in progress is shown in the table below.

Service	Audit	Status
Chief Executive	Emergency Planning / BCP	Audit Complete. Management Response.
Development Services	Development Control S106	Audit in Progress.
Environmental Services	Licensing	Audit in Progress.
Legal & Election Services	Freedom of Information	Audit in Progress.
Regeneration	Regeneration	Audit in Progress.
Finance & Procurement	Sundry Debtors	Audit in Progress.
Housing & Benefits	Carelink	Audit in Progress.
Finance & Procurement	NNDR	Audit in Progress.
Finance & Procurement	Council Tax	Audit in Progress.

# 7.4 Progress against Audit Plan

- 7.4.1 The current year to date has seen steady progress against planned audits and all of the audits in progress or nearing completion as detailed in 7.3 above will be completed soon. It is anticipated at this stage that a satisfactory year end position will be achieved.
- 7.4.2 Current key progress information is summarised in the following table, excluding unplanned work unless otherwise stated:

Summary Progress Information to 31 <sup>st</sup> January 20	18
Percentage of Audit Plan completed / substantially completed	47%
Percentage of Audit Plan In Progress	21%
Number of recommendations made (including unplanned work)	131
Percentage of recommendations agreed with Service Managers (including unplanned work)	100%
Percentage of recommendations implemented within agreed timescale (including unplanned work)	100%

7.4.3 Should recommendations have not been agreed, compensating controls exist or service managers have accepted the risk / inefficiency of the current system for the benefit of service delivery.