ANGUS COUNCIL

SCRUTINY AND AUDIT COMMITTEE - 31 JANUARY 2023

INTERNAL AUDIT ACTIVITY UPDATE

REPORT BY CATHIE WYLLIE - SERVICE LEADER - INTERNAL AUDIT

ABSTRACT

This report provides the Internal Audit Activity update on the main findings of internal audit reports issued since the date of the last Scrutiny and Audit Committee.

1. RECOMMENDATIONS

It is recommended that the Scrutiny and Audit Committee:

- (i) note the update on progress with the planned Internal Audit work (Appendix 1)
- (ii) note management's progress in implementing internal audit and counter fraud recommendations (Appendix 1)

2. ALIGNMENT TO THE ANGUS COMMUNITY PLAN /COUNCIL PLAN

The contents of this report contribute to the achievement of the corporate priorities set out in the Angus Community Plan and the Council Plan. This is achieved through this report providing the Scrutiny & Audit Committee with information and assurance about council internal control systems, governance and risk management.

3. BACKGROUND

Introduction

- 3.1 Annual Internal Audit plans are ratified by the Scrutiny and Audit Committee and a progress report is submitted to each meeting of the Committee. This report outlines progress in delivering the plan agreed at the Scrutiny & Audit Committee in March 2022 (Report 78/22).
- 3.2 Internal Audit issues a formal report for each review undertaken as part of the annual audit plan. Each report contains an action plan which incorporates all the recommendations made. This action plan, prepared under SMART (Specific, Measurable, Achievable, Realistic, Timed) criteria, is agreed with management who nominate persons responsible for taking forward the actions and who set their own completion date for each action. This agreed action plan forms an integral part of the final audit report and audit recommendations are ranked to indicate materiality. SMART internal control actions are also agreed following Counter Fraud investigations.
- 3.3 As part of the on-going audit process, Internal Audit reviews the implementation of recommendations and reports the results to each meeting of the Scrutiny and Audit Committee.
- 3.4 Ad-hoc requests for advice are dealt with as they arise.

Current position

3.5 The latest results are included in the Update Report at **Appendix 1** and summarised in section 4 below.

3.6 One of the eight audits from 2021/22 that were incomplete at June 2022 remains in progress, and a draft report has been issued for the other which was still in progress at the last meeting of this Committee. We expect to report both of these in March 2023. All 2021/22 work is complete for ANGUSalive and the IJB.

4. SUMMARY OF ASSURANCES

- 4.1 The following table summarises the conclusions from audit work completed since the last Scrutiny & Audit Committee. Further information on each audit, and definitions of control assurances, are provided in Appendix 1.
- 4.2 Recommendations from consultancy work are not graded. The number of recommendations made are noted under the Grade 4 column. * In the final column denotes that the service already has actions in place to address weaknesses identified in the audit or has action plans for other improvements in progress.

Audit	Overall control assurance	Control assessment by objective	No. of Audit Actions by Prior			
			1	2	3	4
Continuous auditing Payroll	Comprehensive		-	-	-	-
Continuous auditing Creditors Duplicate payments	Substantial		-	-	-	-

5. FINANCIAL IMPLICATIONS

There are no direct financial implications from this report.

6. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment it not required, as this report is providing reflective information for elected members.

NOTE: No background papers, as detailed by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information) were relied on to a material extent in preparing the above report.

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Appendix 1 Internal audit update report

Angus Council Internal Audit



Update Report Scrutiny & Audit Committee 31 January 2023

Cathie Wyllie Service Leader – Internal Audit Strategic Policy, Transformation & Public Sector Reform

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INTRODUCTION

This report presents the progress of Internal Audit activity within the Council from June 2022 and provides an update on progress with:

- planned audit work, including new audits drawn from the audit pool; and
- implementing internal audit and counter fraud recommendations

AUDIT PLAN PROGRESS REPORT

The table below notes all work that is started or in progress, including incomplete work from June 2022. .

As previously reported eight audits from 2021/22 were in progress, but incomplete at June 2022. Further progress has been made, with a draft report issued for one of these audits, and one other still in progress.

A number of 2022/23 audits are in progress and planning is underway for several others.

We have been asked by the Director of HR, Digital Enablement, IT & Business Support, and the Manager – Business Support, to carry out an audit of Payroll to provide assurance that the key controls and action plan put in place recently are sufficient to mitigate the risks and issues identified within the delivery of the service. This audit is now included within the plan for 2022/23 and will be carried out in January.

Definitions for control assurance assessments are shown at the end of this report.

Progress with Internal Audit Work post June 2022

Audits	Planned	WIP status	Overall control assurance	Control assessment by objective	S&A committee date / (target in italics)
Corporate Governance					
Corporate Governance annual review – 2021-22	June 2022	Complete	N/A	N/A	23 June 2022 (Report 157/22)
Review of GDPR compliance (Business Support) (2021/22 plan)	May 2022	Report agreed, awaiting action plan	Substantial		Oct. 2022
Project Management	Feb. 2023	Planned			April 2023
Review of GDPR compliance (Education & Lifelong Learning)	October 2022	In Progress			Mar. 2023
Financial Governance					
Payroll continuous auditing April- September 2022 October – December 2022	On-going	Complete Complete	Comprehensive	4	Nov. 2022 Jan. 2023
Creditors continuous auditing Duplicate Payments April – June 2022 July -August 2022 September 2022 October – December 2022 Same person registration and authorisation	On-going	Complete Complete Complete Complete Awaiting information	Substantial		Aug. 2022 Oct 2022 Nov 2022 Jan. 2023
External Placements (Children)	Mar./Apr. 2023	Not started			June 2023
Comfort Funds	Oct./Nov. 2022	Draft report issued			Mar 2023
Programme of random cash counts	Throughout the year	In progress			Throughout the year
LEADER - Rural Funding	TBC	Not started			TBC
Payroll (added November 2022)	Jan. 2023	Planned			Mar. 2023

IT Governance					
End User Computing (2021/22 plan)	Feb/March 2022	Complete	Substantial	*	Nov 2022
IT User Access Administration SEEMIS	Feb. 2023	Planned			Apr. 2023
Digital Strategy and Governance	Feb./Mar. 2023	Planned			Apr. 2023
Cyber security	TBC	Planning			TBC
Internal Controls					
Procurement – Exemptions from Tendering process (2021/22 plan)	August 2021	Complete	Limited	•	Aug. 2022
Fostering, adoption and kinship allowances (2021/22 plan)	May 2022	Complete	Comprehensive	+	Oct. 2022
Adults with incapacity follow- up (2021/22 plan)	Mar./April 2022	Draft report issued			Mar 2023
PDR Appraisal System	April 2023	Not started			June 2023
Mandatory E-Learning Courses	March 2023	Not started			June 2023
Asset Management					
IT Asset Hardware Inventory	March 2023	Planned			June 2023
Surplus Assets	Feb. 2023	Planning			April 2023
Legislative and other compliance			l		1
Corporate parenting (2021/22 plan)	Mar. – May 2022	Complete	Comprehensive	+	Oct. 2022
Equalities Impact Assessments & Fairer Scotland Duties	Feb. 2023	Not started			April 2023
Private Water Supplies Testing	Jan. 2023	Planned			March 2023

Participatory Budgeting	Jan./Feb. 2023	Planned			April 2023
Consultancy and Advice					
Organisational resilience (2021/22 plan)	Oct. 2021 Nov 2022	In progress	N/A	N/A	Mar. 2023
Business support review (2021/22 plan)	Dec 2021/Jan 2022	Complete	N/A	N/A	Oct. 2022
Firmstep – Post implementation Review of Project Development	TBC	Not started			TBC
Health & Safety	Jan. 2023	Planned			April 2023

Angus Alive and Angus Health & Social Care IJB

Angus Council's Internal Audit staff work on the audit plans for both ANGUSalive and Angus Health & Social Care IJB. Reports for both bodies are presented to their respective audit committees throughout the year. Where IJB audit reports are particularly relevant to the Council they will also be reported to the Scrutiny & Audit committee.

The ANGUSalive Annual Internal Audit Plan for 2022/23 was agreed at their Finance & Audit Sub-committee on 25 March 2022 and the first audit is currently in progress.

The IJB Annual Internal Audit plan for 2022/23 was agreed by the IJB Audit Committee in June 2022. Planning for the Council's Internal Audit team input into this year's plan is underway.

SUMMARY OF FINDINGS OF INTERNAL AUDIT REVIEWS

This section provides a summary of the material findings of internal audit reviews concluded since the last meeting. It also provides information on the number of recommendations made. Recommendations are ranked in order of importance, with Priority 1 being the most material. Execution of recommendations is followed up by Internal Audit and reported to this Committee.

Members are asked to consider the following summaries and provide any commentary thereon.

Audit	Overall control Control assurance assessment by objective		No. of Audit Actions by Priority			
			1	2	3	4
Continuous auditing Payroll	Comprehensive	4	-	-	-	-
Continuous auditing Creditors Duplicate payments	Substantial		-	-	-	-

Data Analysis/Continuous Auditing

Continuous auditing analysing data extracted from Council systems is undertaken using the data analysis software, CaseWare IDEA (Interactive Data Extraction Analysis). The Continuous Auditing programme covers:

- Payroll
- Creditors (Accounts Payable), and
- System log-in access.

We are reporting on Payroll and Creditors in January 2023.

Payroll Comprehensive assurance

For October and December 2022 we checked

- the top 10 payments
- for duplicate NI number
- for No NI number
- Duplicate bank accounts

All instances that were identified were explained satisfactorily. There was one incorrect payment in the top 10 payments, however this had already been identified and was being rectified at the time of our audit work.

Creditors Duplicate Payments Substantial assurance

There were no duplicate payments identified in October or December 2022. In November there were two duplicate payments identified, each to the same supplier for a recurring amount below £20. Refunds are being arranged. We identified that there were two accounts for the supplier, and these will be merged to help avoid duplicate payments in future.

Implementation of actions resulting from Internal Audit recommendations

Background

The summary report is presented below in accordance with the agreed reporting schedule.

Summary of Progress – Internal Audit

The figures presented in the tables below have been obtained after analysis of the audit actions recorded and monitored on the Pentana Performance system. The information presented below reflects the 30 (33 at 21 November 2022) Internal Audit actions outstanding as at 31 December 2022 (excludes actions for Angus Alive and IJB). CLT receive and review regular detailed reports on the outstanding audit actions.

- Table 1 identifies actions which would have been overdue but have had the original completion date extended.
- Table 2 details all other actions which are **currently in progress** (not yet reached due date).

Internal Audit Actions - In Progress as at 31 December 2022 (Due date extended)

	Year Audit						
D : 4 4	Carried					Not	Grand
Directorate	Out	Level 1	Level 2	Level 3	Level 4	Graded	Total
	2019/20	-	4	1	-	-	5
HR, DE, IT &	2020/21	-	3	-	1	-	4
Business Support	2021/22	3	2	2	-	-	7
	2019/20	-	-	-	-	-	-
Legal & Democratic	2020/21	-	-	-	-	-	-
	2021/22	1	3	1	-	-	5
	2019/20	-	-	-	-	-	-
Infrastructure	2020/21	-	1	-	-	-	1
	2021/22	-	-	-	-	-	-
Grand Total		4	13	4	1	-	22

Internal Audit Actions - In Progress as at 31 December 2022 (Not yet reached due date)

Directorate	Year Audit Carried Out	Level 1	Level 2	Level 3	Level 4	Not Graded	Grand Total
SPT & PSR	2020/21 2021/22	- 1	-	-	-	-	- 1
Children, Families & Justice	2020/21 2021/22		-	- 1	1	-	2
HR, DE, IT & Business Support	2020/21 2021/22	-	1 -	-	-	-	1 -
Vibrant Communities & Sustainable Growth	2020/21 2021/22	-	- 1	2		-	- 3
Legal & Democratic	2020/21 2021/22	-	- 1	1 1	1 1		- 1
Grand Total		1	3	3	1	-	8

Summary of Progress – Counter Fraud

Internal control actions resulting from counter fraud reviews are included in Pentana to allow them to be monitored more effectively. Counter Fraud recommendations are not assigned a priority.

Counter Fraud Actions - Overdue as at 31 December 2022

Directorate	Year review Carried Out	Total
Vibrant Communities & Sustainable Growth	2021/22	2
Grand Total		2

Counter Fraud Actions - In Progress as at 31 December 2022 (Due date extended)

Directorate	Year review Carried Out	Total
HR, Digital Enablement, IT & Business Support	2019/20	1
Grand Total		1

Level of Assurance definitions

Level of Assurance	Definition
Comprehensive Assurance	There is a sound control framework in place designed to achieve the system objectives, which should be effective in mitigating risks. Some improvements in a few, relatively minor, areas may be required, and any residual risk is either being accepted or addressed by management.
Substantial Assurance	The control framework in place is largely satisfactory, however there are a few areas where improvements could be made to current arrangements to reduce levels of risk, and/or there is some evidence that non-compliance with some controls may put some of the system objectives at risk.
Limited Assurance	Some satisfactory elements are evident within the control framework. However, some significant weaknesses have been identified which are likely to undermine the achievement of objectives, and/or the level of non-compliance with controls puts the system objectives at risk.
No Assurance	The control framework is ineffectively designed and operated. The issues identified require immediate attention to address the risks to the Council which are currently unacceptable. Significant improvements are required.

Control assessment definitions

Control Assessment	Definition
Red	Fundamental absence or failure of key control
Amber	Control objective not achieved – control is inadequate or ineffective
Yellow	Control objective achieved – no major weakness but scope for improvement
Green	Control objective achieved – control is adequate, effective & efficient

Recommendation Priority definitions

Priority	Definition
1	Recommendation concerning the absence/failure of fundamental control which is critical to the success of the system. Major weakness which significantly impairs the overall control framework. Immediate management action required. Very high-risk exposure .
2	Recommendation concerning absence or non-compliance with key control which creates significant risks within the organisation. Substantial weakness identified. Prompt management action required. High-risk exposure .
3	Recommendation concerning absence or non-compliance with lower-level control, or an isolated instance of non-compliance with a key control. The weakness identified is not necessarily great, but controls would be strengthened, and the risks reduced if it were rectified. To be addressed by management within a reasonable timescale. Moderate risk exposure .
4	Recommendation concerning minor issue, which is not critical, but implementation would improve the system and/or strengthen controls. To be addressed by management within a reasonable timescale. Limited risk exposure.