

#### **Audit and Governance Committee**

13 April 2016

Report of the Head of Internal Audit

## **Internal Audit Follow Up Report**

## **Summary**

1. This is the regular six monthly report to the committee setting out progress made by council departments in implementing actions agreed as part of internal audit work.

## **Background**

- 2. Where weaknesses in systems are found by internal audit, the auditors discuss and agree a set of actions to address the problem with the responsible manager. The agreed actions include target dates for issues to be dealt with. The auditors then carry out follow up work to check that the issue has been resolved once these target dates are reached. The follow up work is carried out through a combination of questionnaires completed by responsible managers, risk assessment, and by further detailed review by the auditors where necessary. Where managers have not taken the action they agreed to, issues are escalated to more senior managers, and ultimately may be referred to the Audit and Governance Committee.
- 3. A summary of the findings from follow up work is presented to this committee twice a year. The current report covers agreed actions with target dates up to 29 February 2016.

### Consultation

4. Details of the findings of follow up work are discussed with the relevant service managers and chief officers.

### Follow up of internal audit agreed actions

5. A total of 147 actions have been followed up since the last report to this committee in September 2015. A summary of the priority of these actions is included in figure 1, below.

Figure 1: actions followed up as part of the current review

Priority of actions*	Number of actions followed up			
1	4			
2	43			
3	100			
Total	147			

The priorities run from 1 (high risk issue) to 3 (lower risk)

6. Figure 2 below provides an analysis of the actions which have been followed up, by directorate.

Figure 2: actions followed up by directorate

Priority of actions	Number of actions followed up by directorate							
	OCE	CES	CANS	CSES	AS	CBSS		
1 (High)	0	0	2	0	1	1		
2 (Medium)	0	7	5	3	5	23		
3 (Low)	2	0	7	48	3	40		
Total	2	7	14	51	9	64		

- 7. Of the 147 agreed actions 90 (61.2%) had been satisfactorily implemented and 5 (3.4%) were no longer needed<sup>1</sup>.
- 8. In a further 52 cases (35.4%) the action had not been implemented by the target date, but a revised date was agreed. This is done where the delay in addressing an issue will not lead to unacceptable exposure to risk and where, for example, the delays are unavoidable (eg due to unexpected difficulties or where actions are dependent on new systems being implemented). These actions will be followed up after the revised target date and if necessary they will be raised with senior managers in accordance with the

<sup>&</sup>lt;sup>1</sup> For example because of other changes to procedures or because the service has ended or changed significantly.

escalation procedure. Figure 3 below shows the priority of these actions.

Figure 3: priorities of actions with revised implementation dates

Priority of actions	Number of actions with a revised implementation date
1 (High)	0
2 (Medium)	18
3 (Low)	34
Total	52

### **Conclusions**

9. The follow up testing undertaken confirms that in general good progress has been made by council departments to rectify weaknesses in control identified through internal audit work. This is an ongoing process and progress in implementing agreed actions will continue to be monitored and reported as required through the escalation procedure. There are no specific issues that need to be brought to the attention of the Audit and Governance Committee at this time.

## **Options**

10. Not relevant for the purpose of the report.

# **Analysis**

11. Not relevant for the purpose of the report.

# **Corporate Priorities**

12. This report contributes to the council's overall aims and priorities by helping to ensure probity, integrity and honesty in everything we do. It also contributes to all the improving organisation effectiveness priorities.

# **Implications**

13. There are no implications to this report in relation to:

### Finance

- Human Resources (HR)
- Equalities
- Legal
- Crime and Disorder
- Information Technology (IT)
- Property

## **Risk Management**

14. The council will fail to properly comply with Public Sector Internal Audit Standards (PSIAS) if it does not establish procedures to follow up on audit recommendations and report progress to the appropriate officers and members.

### Recommendations

- 15. Members of the Audit and Governance Committee are asked to:
  - consider the progress made in implementing internal audit agreed actions as reported above (paragraphs 5 – 9)

### Reason

To enable Members to fulfil their role in providing independent assurance on the council's control environment.

#### **Contact Details**

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	Report Approved	Date	4 April	2016		
Specialist Implications Off	icers					
Not applicable						
Wards Affected: Not applicable			All	~		
For further information please contact the author of the report						
Background Papers:						
None						
Annexes						
None						