# ARGYLL AND BUTE COUNCIL

**AUDIT COMMITTEE** 

#### STRATEGIC FINANCE

**02 DECEMBER 2016** 

#### **INTERNAL AUDIT SUMMARY OF ACTIVITIES**

#### 1. EXECUTIVE SUMMARY

- 1.1 The objective of the report is to provide a summary of Internal Audit activity and progress during Quarter 3.
- 1.2 Core activities together with a progress update statement are shown below.
  - **16/17 Audit Plan progress**: The Audit plan is currently on track.
  - Individual Audits undertaken: 9 audits have been completed during the period. Of these Audits, 3 are rated as High and 4 are rated as Substantial, 1 Reasonable and 1 No assurance.
  - Continuous Monitoring Programme Testing: A number of auditable units are subject to continuous testing. Management have responded to previous quarter notifications and there are no outstanding issues.
  - **Performance indicators**: Current status is green / on track.

#### **INTERNAL AUDIT SUMMARY OF ACTIVITIES**

## 2. INTRODUCTION

- 2.1 The objective of the report is to provide an update on Internal Audit activity during Quarter 3 against a number of areas;
  - 16/17 Audit Plan progress
  - Individual Audits undertaken
  - Continuous Monitoring Programme Testing
  - Internal Audit Development Plan
  - Performance indicators

#### 3. RECOMMENDATIONS

- 3.1 Members are requested to:
  - 1) Note the content of the report.
  - 2) Approve the rescheduling of the Waste Management Audit

#### 4. DETAIL

- 4.1 The 16/17 Audit Plan is currently on track. In addition to the reports submitted today there are an additional 3 audits currently in progress, being Common Good Property, Pool Cars and Risk Management.
- 4.2 There is one amendment to the 16/17 Audit plan which is as a result of service resourcing issues and competing workload commitments. This Audit will now take place in Quarter 1, 17/18 and has been factored into the draft 17/18 plan. As a substitute it is proposed that additional continuous monitoring activity will be undertaken.
- 4.3 Audits completed to November are detailed in Table 1.

Table 1: Summary of Audits performed in Quarter 3 2016/17

Audit Name	Level of Assurance	No. of Actions	High Actions
Procurement - PECOS	High	0	0
Off-Contract Purchasing	High	0	0
TOTAL – Roads Costing System	High	2	0
Debt Recovery & Write-off	Substantial	8	1
ICT (Grant Thornton)	Substantial	3	3
Children's Units	Substantial	8	1
TIF Tax Incremental Financing	Substantial	3	1
Property Maintenance	Reasonable	4	1
All Weather Pitch Facilities	No Assurance	7	7

4.4 Audits planned for the Quarter 4 16/17 are shown in the table below.

Quarter 4
Additional Support Needs
Service Planning
Sustainable Communities
Common Good Property

4.5 A number of areas which were previously subject to individual audits now form part of our continuous monitoring programme. These areas are tested on a regular basis and detailed reporting will be by exception to Audit Committee. Standard audit tests are applied relevant to each auditable unit. A follow up process is in place whereby management are advised of findings and where appropriate, requested to take remedial actions. There are currently no outstanding follow-up points arising from previous quarters testing. Table 2 below summarises activity to date outlining issues arising and provides an overall level of assurance together with follow up detail.

**Table 2: Continuous monitoring programme results:** 

Audit Unit	Areas Tested	Issues Arising	Overall Assurance Level	Follow up
Payroll and Overtime	<ul> <li>Excessive &amp; Regular Overtime</li> <li>Ghost Employees</li> <li>Duplicate Employees</li> </ul>	<ul><li>Excessive overtime payments</li><li>None</li><li>None</li></ul>	Substantial	Demand /Activity levels have resulted in a requirement for overtime.
General Ledger	Creation and posting of journals demonstrate segregation of duties	Sample of 20 journals tested, all were found to be uploaded and posted by separate individuals.	Substantial	N/A
Council Tax	All discounts, benefits, exemptions and allowances are properly calculated, recorded and authorised before being input to the system.	Sample of 50 discounts /exemptions, there was no supporting evidence available to support 2 of the discounts/exemptions awarded.	Substantial	Management have reminded staff to ensure supporting evidence is recorded appropriately.
Treasury	Borrowing & lending transactions (incl. segregation of duties, lending limits & access	• None	Substantial	N/A

Audit Unit	Areas Tested	Issues Arising	Overall Assurance	Follow up
	to the system)  • Loans repayments & interest (incl. recording & payment of interest and any changes to standing data)		<b>Level</b> Substantial	N/A
Creditors	Authorisation of batch invoice payments	Sample of 40 invoice batches, 5 instances of non-compliance with the authorised signatory list were identified.	Reasonable	Management to review limits and update authorised signatory list where appropriate.
NDR	All relevant data from the valuation roll is promptly and correctly transferred to the assessment roll.	• None	Substantial	N/A
	Bills are correctly calculated (including discounts and reliefs etc) for all relevant properties.	• None		
School Fund Visit – Rockfield Primary School	Compliance with circular 1.10	No formal elections are held. Elections are carried out informally at staff meetings.	Substantial	Formal elections will be held at a meeting open to both staff and parents.
		School do not currently document minutes of their school fund committee meetings.		Minutes of committee meetings will be documente d
		It was found that		Head     Teacher

Audit Unit	Areas Tested	Issues Arising	Overall Assurance Level	Follow up
		reconciliations are periodically checked and signed by the Head Teacher.	20101	will review and sign all reconciliati ons going forward.
		School use a certification slip in the rare event of unreceipted expenditure, however this is only signed by the Treasurer/Head Teacher.		Going forward, all unreceipted expenditure slips will be signed by the Treasurer / Head Teacher and the person incurring the expenditure.
		No inventories are maintained with regards to equipment purchased through the general fund.		Inventories of equipment purchased through the general fund will be maintained
School Fund Visit – St Columba's Primary School	Compliance with circular 1.10	No formal elections are held. Elections are carried out informally at staff meetings.		Formal elections will be held at a meeting open to both staff and parents.
		School do not currently document minutes of their school fund committee meetings.		Minutes of committee meetings will be documente d.

4.6 A follow up process for National/External reports is in place whereby management are advised of recommendations within reports and where appropriate, requested to take required actions. Table 3 below details the

National Reports issued during quarter 3 along with follow up detail.

**Table 3: Issue of National Reports in Quarter 3:** 

National Report	Issued To	Detail	Management response/ Action taken
Audit Scotland – Social Work in Scotland	<ul> <li>Chief Executive</li> <li>Chief Officer, Health &amp; Social Care</li> <li>Head of Strategic Finance</li> <li>Head of Governance &amp; Law</li> </ul>	Social work in Scotland is at a watershed and the public and service users must be more involved in shaping future provision. Current approaches to providing services will not be sustainable.	Report currently with management for consideration and will be subject to routine follow-up.
NAO – The Syrian Vulnerable Persons Resettlement Programme	<ul> <li>Chief Officer, Health &amp; Social Care</li> <li>Executive Director, Community Services</li> <li>Business Improvement Manager, Community Services</li> </ul>	This report examines the achievements of the Syrian Vulnerable Persons Resettlement programme to date, the processes in place to deliver the programme, progress against the targets set, and the risks to future delivery of the programme and whether these are being addressed.	with management for consideration and will be subject to routine follow-up.
NAO - Children in need of help or protection	<ul> <li>Chief Officer, Health &amp; Social Care</li> <li>Head of Children &amp; Families</li> <li>Executive Director, Community Services</li> <li>Acting Head of Education</li> </ul>	This report examines the department of Education's progress in improving the system to help and protect children.	For information only.

4.7 In addition to the Social Work in Scotland report mentioned in the table above we have previously issued National reports on Health and Social Care integration and Changing Models of Health and Social Care Integration. These reports make reference to risks in relation to governance and accountability. The partnership chief officer acknowledges these reports, and the issues contained within and, in an attempt to address some of these risks the partnership is currently undertaking an assurance mapping exercise. Internal Audit will review the outcome of this exercise together with some detailed follow up an update will be provided to the

March meeting of the Committee.

- National Fraud Initiative (NFI). Data matching involves comparing computer records held by one body against other computer records held by the same or another body to see how far they match. This is usually personal information. Computerised data matching allows potentially fraudulent claims and payments to be identified but the inclusion of personal data within a data matching exercise does not mean that any specific individual is under suspicion. Where a match is found it indicates that there may be an inconsistency which requires further investigation. No assumption can be made as to whether there is fraud, error or other explanation until an investigation is carried out. The Council is currently on track with NFI upload timetable and where matches have been released these are being reviewed.
- 4.9 This section highlights progress made against the actions points in our Internal Audit development plan. These include improvements identified as a result of our review against the Public Sector Internal Audit Standards. An additional action has been added in respect of self-assessment activity.

**Table 4: Internal Audit Development Key Actions:** 

Area For Improvement	Agreed Action	Progress Update	Timescale
Training and CPD	Formalise our plans for internal audit training, including continuing professional development (CPD)	On Track:  Strategic Finance service have recently been awarded Employer Accreditation (CIPFA)	On-going
Audit Plan Preparation	2017/18 Draft Plan submitted to December Audit Committee	Report submitted for discussion.	December 2016
SharePoint site	Roll – out stakeholder system view	Rescheduled to due available resource.	Rescheduled December 2016
PSIAS – Internal Self-Assessment	IA team to review process and guidance documentation in preparation for External review	On Track	February 2017

4.10 Internal Audit scorecard data is available on pyramid. The indicators are currently showing as on track. The undernoted table is an extract of the key information.

Internal Audit Team Scorecard 2016 – 17 FQ 2 16/17			
TEAM RESOURCES			
PRDs IA Team G ⇒	TARGET	Percentage of PRDs complete	

	90%		10	00%	
	Number of eligible		Number of PRDs		
	employees FTE		complete FTE		
	4			4	
Financial					
Revenue Finance	BUDGET	-	ACTUAL	G	
YTD Position	£121,988		£110,112		
Year End Outturn	£259,149		£259,149	$\Rightarrow$	
SF02 Assurancethat finance	cial and				
management controls are op effectively	erating				
Audit risk assessment	Status		On Track	G	
prepared by 31 January	Target		On Track	G <b>1</b> r	
	Status	(	On Track	G	
Annual Audit Plan	Target		On Track	⇒	
Annual audit plan approved	Status		On Track	<u> </u>	
by 31 March	Target	(	On Track	G ⇒	
0/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/	Actual		100%		
% of audit recommendations	Target		100%	G	
accepted	Benchmark		100%	$\Rightarrow$	
% Recommendations	Actual		100%	G	
followed up	Target		100%	_	
Tollowed up	Benchmark			<b>&gt;</b>	
	Actual		50%	R	
Percentage qualified staff	Target		60%		
	Benchmark			-	
0/ actiofaction rates from	Actual		90%	G	
% satisfaction rates from post audit surveys	Target		80%	, n	
	Benchmark			•	
% customer satisfaction with	Actual		100%	G	
audit reports	Target		80%	1	
addit reports	Benchmark				
	Actual		24 days	R	
Internal Audit Training days	Target	,	30 days		
	Benchmark			1	

## 5. CONCLUSION

5.1 The 16/17 Audit Plan is currently on track. Our continuous monitoring programme has provided an overall substantial level of assurance. Planned sharepoint development work is currently on hold due to resource constraints.

# 6. IMPLICATIONS

- 6.1 Policy Internal Audit continues to adopt a risk based approach
- 6.2 Financial -None

- 6.3 Legal -None
- 6.4 HR None
- 6.5 Equalities None
- 6.6 Risk None
- 6.7 Customer Service None

Kevin Anderson, Chief Internal Auditor 02 December 2016

# For further information contact:

Kevin Anderson, Chief Internal Auditor (01369 708505)