

APPENDIX 1a - SUMMARIES OF COMPLETED AUDITS

A CORPORATE – FOLLOW UPS

A1 Executive Officer Decision Making Follow Up

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
Total Recommendations	Implemented	Partially Implemented	Not Implemented	An audit review of Officer Executive Decision (OED) Making was completed in August 2018 which concluded Limited Assurance. A summary of the report was presented to the Audit Committee in September 2018. Six high or medium priority recommendations were made and the objective of this review was to test if the recommendations have now been implemented.
6	6 (100)%	n/a	0	
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
<p>Key Findings: Internal Audit confirmed that good progress has been made with all recommendations fully implemented. Internal Audit have also made some additional recommendations to further enhance the processes in place:</p> <ul style="list-style-type: none"> • The importance of compliance could be further emphasised by the OED guidance noting that it is a criminal offence where there is intentional obstruction, or refusal to supply a copy of an executive officer decision to a member of the public • The OED tracker relies on a manual calculation of days from approval to publication; the robustness of the process would be enhanced by replacing this with a calculated field for working days • Tracing an approved CPG decision to the published OEDs is convoluted and can be addressed by including the CPG contract number on the OED Form • There was still some non-compliance with publication deadlines and not all incidences of this were escalated to the Monitoring Officer. Compliance should be monitored during the Directorate Support Managers and Democratic Service liaison meetings and all breaches reported to the Monitoring Officer. 				<p>Implemented:</p> <ul style="list-style-type: none"> • The published OED guidance has been amended • The OED guidance has been relaunched via ‘The Brief’ and a presentation to ELM. The Directorate Support Managers maintain an OED tracker which records the progress of OED publication and allows late OEDs to be escalated to the Monitoring Officer • The Procurement Approval Forms now required indication of whether it is an OED or A Key Decision. Procurement documentation now requires the user to indicate whether the decision is an OED or a ‘Key Decision’ • The publication of OEDs is managed through mod.gov. The Directorate Support Managers complete an online web form, which is submitted to Democratic Services for approval and publication • The importance of the publication of OEDs within specific timescales has been communicated through the guidance and ELM presentation • An OED Quarterly Monitoring report has been drafted for review and approval by the Monitoring Officer, but not yet issued.

A2 Budgetary Control – Neighbourhoods / Communities Second Follow Up Report

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
Total Recommendations	Implemented	Partially Implemented	Not Implemented	To verify the status of the two outstanding recommendations, that were reported as being partially implemented in the first Internal Audit follow up report issued in March 2018.
2	1	1	0	
Internal Audit should be provided with confirmation and evidence, that the partially implemented recommendations is complete, when the agreed due date in the Management Action Plan is reached. A further review may be undertaken in 2019/20.				This Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
Key Findings: <ul style="list-style-type: none"> Finance structures have been revised to reflect revised Directorate structures. This Internal Audit review has not covered the adequacy of the revised Finance structures An internal recharging model has been completed and will be implemented for 2019/20 budgets. This Internal Audit review has not covered the adequacy of the internal recharge model. 				Implemented: <ul style="list-style-type: none"> The Finance Team structure has been reviewed to reflect revised Directorate structures. Partially Implemented: <ul style="list-style-type: none"> A revised costing model is complete for annual corporate overhead charges and will be implemented as part of the budget setting process for 2019/20.

A3 Budgetary Control – Adults, Children and Education Second Follow Up Report

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
<i>Total Recommendations</i>	<i>Implemented</i>	<i>Partially Implemented</i>	<i>Superseded</i>	<p>To verify the status of the two outstanding recommendations, that were reported as being partially implemented in the first Internal Audit follow up report issued in April 2018.</p> <p>This Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.</p>
2	0	1	1	
<p>Internal Audit should be provided with confirmation and evidence, that the partially implemented recommendations is complete, when the agreed due date in the Management Action Plan is reached. A further review may be undertaken in 2019/20.</p>				
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
<p>Key Findings:</p> <ul style="list-style-type: none"> Internal Audit acknowledge the progress made in documenting Knowledge management; however this remains in progress Budget managers' training needs are being addressed by risk based 1:1 support by Finance business support staff and finance Business Partner activity. Internal Audit has not reviewed the adequacy of the support provided as part of this review. 				<p>Partially Implemented:</p> <ul style="list-style-type: none"> The introduction of formal Knowledge Management processes is still underway and the original due date of 30 April 2019 has not yet been reached. <p>Superseded:</p> <ul style="list-style-type: none"> Finance for non-financial management training, has been superseded by risk based 1:1 support for budget managers.

B ADULTS, CHILDREN AND EDUCATION / PEOPLE – FOLLOW UPS

B1 Children’s Services Safer Recruitment Follow Up Report

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
Total Recommendations	Implemented	Partially Implemented	Not Implemented	<p>To test whether the five recommendations identified in the previous Internal Audit report of March 2018 have now been implemented.</p> <p>The Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.</p>
5	1 (20%)	3 (60%)	1 (20%)	
<p>Internal Audit will undertake further work on Children’s Services Safer Recruitment in 2019/20, following the introduction of the new I-Trent HR Payroll system, which should enable more effective monitoring of DBS.</p>				
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
<p>Key Findings:</p> <ul style="list-style-type: none"> • DBS checks were obtained for four of five new employees sampled by Internal Audit; for one employee a risk assessment was carried out, however it was incomplete • References were not held on file for one of the five starters, sampled by Internal Audit • No qualification was held on file for one of the five starters sampled by Internal Audit • Posts requiring a DBS check had been recorded as such on Vision • DBS checks had not been completed, using e-bulk or Vision, following the last three year expiration date, for four of five employees sampled by Internal Audit. 				<p>Implemented:</p> <ul style="list-style-type: none"> • Posts requiring a DBS had been recorded on Vision and where a risk assessment was required this had been undertaken. <p>Partially Implemented:</p> <ul style="list-style-type: none"> • DBS checks should be undertaken prior to starting employment (or an appropriate risk assessment undertaken) • Recruiting managers should be further reminded of the requirement to seek references for applicants to posts subject to DBS checks, prior to short listing for interview • Recruiting managers should be further reminded of the requirement to sight evidence of qualifications and retain copies, prior to an employee starting. <p>Not Implemented:</p> <ul style="list-style-type: none"> • Managers should be reminded of the need to ensure that DBS checks are completed every three years.

C RESOURCES
C1 Housing Benefits Further Follow Up

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
Total Recommendations	Implemented	Partially Implemented	Not Implemented	To test whether the six recommendations originally identified in the Internal Audit report of March 2017 and recorded in the first follow up report of November 2017 as not implemented or in progress, have now been implemented. The Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.
6	4 (67%)	2 (33%)	0 (0%)	
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
<p>Key Findings:</p> <ul style="list-style-type: none"> Overpayments have increased overall from 2017 to 2018, but are levelling out, following completion of staff recruitment and initial training Targeted coaching by the QA team has taken place, where assessment officers have been identified as having below acceptable performance The DWP Performance Development Team (PDT) revisited Bristol in July 2018 and were content with progress on reducing overpayments due to Local Authority error; no return visit/follow up activities are planned Local Authority error overpayments are being predicted as being under the DWP PDT lower threshold in 2018/19; compared to being above the upper threshold in 2017/18 A specialist team has been set up to continue work on reducing the volume and value of debts within the Suspense Account, amongst other work on the systems and information team Although progress has been made in putting resource in place to reduce overpayment, significant further efforts will be required to reduce the total overpayments. 				<p>Implemented:</p> <ul style="list-style-type: none"> Management will need to ensure staff are retained and developed to reduce overpayment levels; this is now business as usual Consideration of additional actions to further reduce overpayments needs to continue; this is now business as usual Overpayment due to Local Authority error should continue to be closely monitored on a case by case basis to ensure that immediate action is taken to stop overpayments and to recover them if this is possible; this is now business as usual Prompt reporting of rejected payments is now in place and ongoing. <p>Partially Implemented:</p> <ul style="list-style-type: none"> Actions identified within the March 2017 Internal Audit report have been implemented and are ongoing. Review of overpayments needs to continue to reduce the overall level and identify unrecoverable debt which should be considered for write off Work on the older items in the Suspense Account has been time consuming though successful; however further work is essential to continue to deal with the volume and value of the items in the Suspense Account.

C2 General Ledger Journals Second Follow Up

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
Total Recommendations	Implemented	Partially Implemented	Not Implemented	<p>To verify the status of the four outstanding recommendations, that were reported as being partially implemented in the first Internal Audit follow up report issued in March 2018.</p> <p>This Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.</p>
4	1	3	0	
<p>Internal Audit should be provided with confirmation and supporting evidence, that the partially implemented recommendations are complete, when the agreed due dates in the Management Action Plan are reached. A further review may be undertaken in 2019/20.</p>				
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
<p>Key Findings:</p> <ul style="list-style-type: none"> An internal recharging model, which should address the three partially implemented recommendations below, has been developed and will be implemented for 2019/20 budgets. This Internal Audit review has not covered the adequacy of the internal recharge model. 				<p>Implemented:</p> <ul style="list-style-type: none"> Preparation of Finance Risk Register <p>Partially Implemented:</p> <ul style="list-style-type: none"> Notifications relating to trading transactions Guidance for trading journal spreadsheets and record keeping Procedures for internal charges and timely posting.

C3 Bank Reconciliations Follow Up

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS					SCOPE SUMMARY
					<p>To verify the status of the six 'high' and 'medium' recommendations, in the Internal Audit report issued in February 2018.</p> <p>This Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.</p>
Total Recommendations	Implemented	Partially Implemented	Not Implemented	Superseded	
6	2 + 1 part	2	0	1 + 1 part	
<p>Internal Audit should be provided with confirmation and supporting evidence, that the partially implemented recommendations are complete, when the agreed due dates in the Management Action Plan are reached. A further review may be undertaken in 2019/20.</p>					
KEY FINDINGS FROM FOLLOW UP					RECOMMENDATIONS STATUS
<p>Key Findings:</p> <ul style="list-style-type: none"> The good progress in reducing unallocated items, which was identified in the previous Internal Audit report, has been maintained A policy and guidance document is being drafted to clearly document the journal approval process For two issues; Rec. 3 and Rec. 4 part (relating to Loans Fund), management have reviewed and accepted the risk raised by Internal Audit, due, respectively, to what management consider to be the low level of risk and compensating controls. 					<p>Implemented:</p> <ul style="list-style-type: none"> Maintain the reduction of unallocated items Clearance of unmatched/unreconciled credit card income Reducing errors in the allocation and posting of income and expenditure. <p>Partially Implemented:</p> <ul style="list-style-type: none"> Undertake a Fraud Risk Assessment of the bank reconciliation process Authorisation of bank/cash book journals. <p>Superseded:</p> <ul style="list-style-type: none"> More frequent journaling of Loans Fund items (risk accepted by management) Reducing unallocated items in the IM Account.

C4 Accounts Payable Follow Up

SUMMARY OF IMPLEMENTATION OF RECOMMENDATIONS				SCOPE SUMMARY
Total Recommendations	Implemented	Partially Implemented	Not Implemented	<p>To verify the status of the high and medium recommendations, that were reported in the Internal Audit report on Accounts Payable (AP) issued in February 2018.</p> <p>This Internal Audit report assessed the progress made to date and reports on the current status of implementation of these recommendations.</p>
8	2	4	2	
<p>Internal Audit should be provided with confirmation and supporting evidence, that the partially implemented recommendations are complete, when the agreed due dates in the Management Action Plan are reached. A further review may be undertaken in 2019/20.</p>				
KEY FINDINGS FROM FOLLOW UP				RECOMMENDATIONS STATUS
<p>Key Findings:</p> <ul style="list-style-type: none"> In spite of considerable efforts by the AP team, issues with late payments of invoices and retrospective orders remain significant. Internal Audit acknowledge the role to that all Services have in addressing this Management have prepared an Action Plan to address outstanding issues raised in this report. 				<p>Implemented:</p> <ul style="list-style-type: none"> Analysis of reasons for late payment of invoices Review procedures for changing Suppliers' bank details. <p>Partially Implemented</p> <ul style="list-style-type: none"> Analysis to improve AP team's compliance with business objective to pay 96% of all invoices on time (within 30 days) Reduce the number of retrospective purchase orders Invoices sent to service departments rather than directly to the AP team Undertake a Fraud Risk Assessment of the AP process. <p>Not implemented:</p> <ul style="list-style-type: none"> BCC terms of supplies and payment referenced to AP team's corporate objective Purchase orders self-authorisation limits.

