## ITEM No ...10.....

### **REPORT TO:** SCRUTINY COMMITTEE – 26 APRIL 2023

REPORT ON: INTERNAL AUDIT PLAN UPDATE AND PROGRESS REPORT

### **REPORT BY: CHIEF INTERNAL AUDITOR**

**REPORT NO: 124-2023** 

### 1.0 PURPOSE OF REPORT

To submit to Members of the Scrutiny Committee an update on the progress towards delivering the 2022/23 Internal Audit Plan; the audits brought forward from the 2021/22 Plan; and information about the number of outstanding internal audit recommendations.

### 2.0 **RECOMMENDATIONS**

i. Members of the Committee are asked to discuss and note the information contained within this report.

### 3.0 FINANCIAL IMPLICATIONS

None

#### 4.0 MAIN TEXT

- 4.1 Appendix one notes the current stage of progress with implementing the 2022/23 Internal Audit Plan and the outstanding items brought forward from the 2021/22 Plan.
- 4.2 Appendix two shows the outstanding internal audit recommendations by service, audit year and risk priority. There are a significant number of actions that are past their agreed completion date and new dates need to be set for these actions.
- 4.3 One item has been added to the planned work in March 2023. Management has requested a review of compliance with the Telematics Policy. This review is underway.

### 5.0 POLICY IMPLICATIONS

This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

#### 6.0 CONSULTATIONS

The Council's Leadership Team have been consulted in the preparation of this report.

### 7.0 BACKGROUND PAPERS

None

Appendix 1 - 2021/22 and 2022/23 Internal Audit Plan update

Appendix 2 - Outstanding Internal Audit Agreed Actions

Cathie Wyllie, Chief Internal Auditor

DATE: 5 April 2023

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## 2021/22 Internal Audit Plan – Progress Report (Audits completed after June 2022)

Not Yet Commenced	Planning	Fieldwork	Reviewing	Draft Repo	ort Issued	Planned Days Utilised / Scrutiny Committee Date
2021/22 INTERNAL AUDIT PLAN		Proposed Co	verage		Status	Assurance Level
Governance Reviews	•				1	
Dundee Integration Joint Board – Viability of External Providers	I To support the Duna	ee Integration Joint Board udit reviews on the IJB Inte	(IJB) Chief Internal Audito ernal Audit Plan.	or through the	Draft report iss	sued
Tayside Contracts			nts in place to manage an cluding current billing arran		Draft report iss	sued
Business Continuity Planning			ns to ensure they have bee priate, lessons learned loca			Reduced Assurance
ICT Reviews						
Cyber Security			cyber security arrangemen ecurity risks are appropriate			
Schools IT Network		f this audit did not conside	ontrols on devices used on the technical application of			Reduced Assurance
System Reviews						
Fire Risk Assessments			ols in place within the Coun- line with relevant legislatio		Draft report is	sued
Interment Fees			ment fees process, ope s, including how it interface		SC 28/09/22	No Assurance

2021/22 INTERNAL AUDIT PLAN	Proposed Coverage	Status	Assurance Level
Procurement / Contract Reviews			
Government Procurement Cards	Review of the internal controls in place to manage and monitor the use of government procurement cards, including the authorisation of card transactions.	SC 8/2/23	Limited assurance

# 2022/23 Internal Audit Plan – Progress Report

Not Yet Planning Fieldwork	Reviewing	Draft Report Issued	Planned Days Utilised / Scrutiny Committee Date
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2022/23 INTERNAL AUDIT PLAN	Proposed Coverage	Status / Update	Assurance Level			
Governance Reviews	Governance Reviews					
Dundee Integration Joint Board	To support the Dundee Integration Joint Board (IJB) Chief Internal Auditor through the provision of internal audit reviews on the IJB Internal Audit Plan.	Planning meeting held with FTF				
Tay Cities Deal	High level review of progress with Tay Cities Deal projects and compliance with grant offer guidance.	Draft report issued				
Staff Wellbeing*	Review of the governance arrangements in place throughout the Council to promote and support staff wellbeing. The scope of this audit will pick up some elements of the absence management audit removed from the plan.					
Workforce Management *	Review of the arrangements in place for workforce management throughout the pandemic, including the development and implementation of remobilisation plans	Removed from plan 8/2/23	N/A			
Financial Sustainability	Review of the arrangements for the continued financial sustainability of Leisure and Culture Dundee following the COVID-19 pandemic.					

2022/23 INTERNAL AUDIT PLAN	Proposed Coverage	Status / Update	Assurance Level
Monitoring of Contractors	Actors High level review of the monitoring of contractors and contract management in relation to construction and maintenance work.		N/A
Absence Management	Review the arrangements in place within the Council to mitigate long term and future absence arising from sickness absences.	Removed from plan 8/2/23	N/A
Planning (Scotland) Act 2019	Review of the arrangements to implement and comply with the new duties arising from the Planning (Scotland) Act 2019 in relation to the Planning System.		
ICT Reviews			
Microsoft Office 365	Review of access permissions and licensing arrangements for Office 365 including linking to management of network access.		
Civica CX	Review of the arrangements for the implementation of Phase 1 of Civica CX incorporating Housing Rent collection and recording of Housing Benefit / Universal Credit housing costs.		
User Access Controls	High level review of the appropriateness of user access levels and associated permissions for a number of the Council's key IT systems including any arrangements put in place during working from home.		
Systems Reviews			
Self-Directed Support*	Review of the Council's approach to fulfil its statutory obligation to offer, those who are eligible, greater choice and control over the support required to meet their needs.	Removed from plan 8/2/23	N/A
Discretionary Housing Payments	Review of the arrangements for the assessment and award of Discretionary Housing Payments within the Council.	SC 07/12/22	Reduced Assurance
Health and Safety – Incident Reports	Review of the Council's arrangements for the recording and reporting of Incident Reports.		
Pentana	Review of the Council's Performance and Risk Management system in terms of management reporting and efficiencies.	Removed from plan 8/2/23	N/A

2022/23 INTERNAL AUDIT PLAN	Proposed Coverage	Status / Update	Assurance Level
	High level review of the arrangements in place to support the decision-making process surrounding children being placed in permanent care and ensure compliance with relevant legislation.	Removed from plan 8/2/23	N/A
Adaptations for People with Disabilities	Review of the arrangements in place within Dundee Health and Social Care Partnership and Neighbourhood Services for the assessment and provision of equipment and adaptations for people with disabilities.		
	Review of the processes for verifying financial assessments within Dundee Health and Social Care Partnership for care services and managing associated debt arrangements.	Removed from plan 8/2/23	N/A
General Ledger	Review of the arrangements in place for the use of General Ledger in developing the budget process, financial monitoring and outturn information and the identification of potential opportunities to make improvements.		
Additional Waste Bin Service	Review of the processes for applying for and allocating additional general waste bins permits	SC 07/12/22	Reduced Assurance
Procurement / Contract Reviews			
Social Work Contracts and Payments*	Review of contract management and commissioning arrangements, including payments, within Dundee Health and Social Care Partnership to assess their adequacy and effectiveness.		
Procurement	Compliance with Tendering Arrangements including review of the arrangements for Contract Waivers		

2022/23 INTERNAL AUDIT PLAN	Proposed Coverage	Status / Update	Assurance Level
Financial Reviews			
School Income Collections and Reconciliations	Review of arrangements of collection, recording, banking and reconciliation of income in secondary schools.	SC 25/4/23	School Funds No Assurance
School Income Collections and Reconciliations		SC 25/4/23	Council Funds Reduced assurance
Corporate Debt Recovery Arrangements	Corporate wide review of the Council's debt management and debt recovery arrangements	Removed from plan 8/2/23	N/A
Stocks and Inventories	Review of year end stock-taking instructions to ensure they are comprehensive and likely to result in reliable stocktaking if followed.	SC 25/4/23. Guidance for services was reviewed	Full Assurance
Contingency and Other			
Advice and Guidance	Provision of ad-hoc support to assist services in respect of specific queries and contribute to the delivery of improvements in the Council's framework of governance, risk management and control. This will include the ongoing provision of advice and guidance surrounding the development of new or changed systems and processes established, including any further grant payments arising from post Covid-19 activity and other support	Ongoing	
	Specific reviews undertaken by internal audit staff to provide formal assurances to management and Elected Members that recommendations previously agreed have been implemented.		
	<ul> <li>Internal Audit Report No. 2018/18 – Integrated Impact Assessments*</li> </ul>	SC 25/4/23	Full Assurance
Follow-up Reviews	<ul> <li>Internal Audit Report No. 2019/04 – Commercial Lets</li> </ul>	SC 25/4/23	Full Assurance
	<ul> <li>Internal Audit Report No. 2020/20 – Asset Management</li> </ul>	Removed from plan 8/2/23	N/A
	<ul> <li>Internal Audit Report No. 2020/22 – Project Management</li> </ul>		
	<ul> <li>Internal Audit Report No. 2020/31 – Brexit</li> </ul>	SC 28/09/22	Full Assurance

2022/23 INTERNAL AUDIT PLAN	Proposed Coverage	Status / Update	Assurance Level
Progress Reviews	Completion of the annual exercise whereby formal assurances are obtained from management that internal audit recommendations have been implemented.	SC 28/09/22	N/A
External Quality Assessment Process	As part of the peer review process developed to ensure conformance with the PSIAS, prepare for and validate the External Quality Assessment of another Internal Audit Service during 2022/23.		N/A
External Quality Assessment Process	Undertake our own self-assessment of conformance with PSIAS and engage with external reviewer	Removed from the plan 8/2/23	N/A
Self-assessment against PSIAS	Self-assessment against PSIAS standards will be required due to delay in external assessment		
Specific Investigations	To respond to requests for advice and assistance as required in respect of cases of suspected fraud, corruption or malpractice.	On-going as required	
Internal Audit Tender Exercise	Specification of need for 2023/24 onwards and tender evaluation, including presentations if required, and award.	Requirements identified and joint tender with Angus Council to be undertaken	
Compliance with Telematics Policy	Review of implementation of and compliance with Telematics Policy in Construction Services. (Added to plan March 2023)		

\* Reviews carried forward that will commence during 2022/23.

### Definitions of assurance level

Level of Assurance	Audit Review Opinion	Follow-Up Audit Opinion
Full Assurance	The principal conclusion drawn from this review is that there is a sound system of control designed to achieve the system objectives and that the controls are being consistently applied.	The principal conclusion drawn from the follow- up work undertaken is that the actions taken by management have addressed the control weaknesses highlighted in the original review.
Reduced Assurance	The principal conclusion drawn from this review is that whilst there is basically a sound system of control there are some areas where it is viewed improvements can be made.	The principal conclusion drawn from the follow- up work undertaken is that whilst some action has been taken to strengthen the control weaknesses highlighted in the original review there are still some recommendations which require to be implemented by management.
Limited Assurance	The principal conclusion drawn from this review is that there are weaknesses in the system which should be addressed.	The principal conclusion drawn from the follow- up work undertaken is that the recommendations agreed with management require to be implemented to overcome the control weakness highlighted in the original review.
No Assurance	The principal conclusion drawn from this review is that there are significant weaknesses in the system which must be addressed.	As for limited assurance

### Appendix 2 Outstanding Internal Audit Agreed Actions

Agreed actions from Internal Audit recommendations are recorded in Pentana and implementation is monitored by Services and the Risk and Assurance Board. Implementation of the agreed action is the responsibility of the service area and the risk exposure identified in the audit remains in place until the action has been completed.

The numbers of outstanding actions in Pentana for each Service, by audit year, at 11 April 2023 are summarised in the following tables.

- Table 1 shows actions that have not yet reached their original agreed due date.
- Table 2 shows actions that have had their due dates extended, but have now past these revised dates. In all cases these need to have new dates agreed.
- Table 3 shows actions overdue from original due date but which have not yet had any extension agreed.

### Table 1 Actions not yet reached original agreed due date

Service	Audit Year	Critical	Significant	Routine	Total
		No.	No.	No.	No.
Corporate Services	2021/22	-	3	1	4
Neighbourhood Services	2021/22	-	3	-	3
Totals		-	6	1	7

### Table 2 Actions overdue from extended due date (all items overdue and new extension required)

Service	Audit Year	Critical	Significant	Routine	Total
		No.	No.	No.	No.
Children and Families	2020/21	-	2	1	3
City Development	2016/17	-	1	-	1
	2018/19	-	2	1	3
	2019/20	-	1	-	1
	2021/22		2		2
Corporate Services	2016/17	-	-	1	1
	2018/19	-	4	-	4
	2020/21	-	1	-	1
Neighbourhood Services	2014/15	-	1	-	1
	2016/17	-	1	-	1
	2017/18	-	1	-	1
	2018/19	-	1	1	2
	2020/21	1	2	-	3
Totals		1	19	4	24

Service	Audit Year	Critical	Significant	Routine	Total
		No.	No.	No.	No.
Children and Families	2021/22	-	-	2	2
City Development	2021/22	-	-	2	2
Corporate Services	2021/22	-	3	6	9
Neighbourhood Services	2021/22	1	-	-	1
Totals		1	3	10	14

## Table 3 Actions overdue from original due date but have not yet had any extension agreed

## **Definitions of Action Priority**

Critical	A key control is absent or inadequate. The existence of the weakness identified, taken independently, or with other findings, significantly impairs the overall system of control. Recommendations in this category are likely to require urgent management attention.
Significant	An element of control is missing or only partial in nature. The existence of the weakness identified, taken with other findings, has an impact on a system's adequacy and effectiveness but does not significantly impair the overall system of internal control. Recommendations in this category are seen as important in contributing towards improvement in internal controls and whilst management action is required these issues are less likely to require immediate management attention.
Routine	A weakness has been identified. However, the existence of this weakness when taken independently or with other findings does not impair the overall system of internal control. Recommendations require management attention in order to make improvements to the system.

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