Internal Audit Progress Report (December 2020)

West Sussex County Council



Southern Internal Audit Partnership

Assurance through excellence and innovation

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1. Role of Internal Audit

The requirement for an internal audit function in local government is detailed within the Accounts and Audit (England) Regulations 2015, which states that a relevant body must:

'Undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.'

The standards for 'proper practices' are laid down in the Public Sector Internal Audit Standards [the Standards – updated 2017].

The role of internal audit is best summarised through its definition within the Standards, as an:

'Independent, objective assurance and consulting activity designed to add value and improve an organisations' operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes'.

The County Council is responsible for establishing and maintaining appropriate risk management processes, control systems, accounting records and governance arrangements. Internal audit plays a vital role in advising the County Council that these arrangements are in place and operating effectively.

The County Council's response to internal audit activity should lead to the strengthening of the control environment and, therefore, contribute to the achievement of the organisations' objectives.

2. Purpose of report

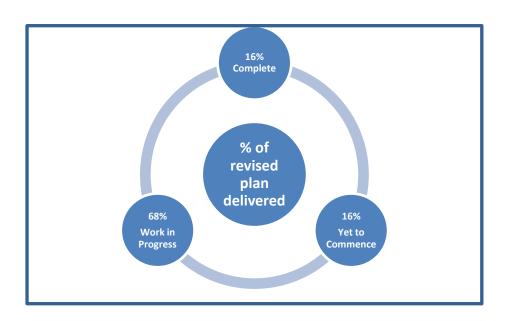
In accordance with proper internal audit practices (Public Sector Internal Audit Standards), and the Internal Audit Charter the Chief Internal Auditor is required to provide a written status report to 'Senior Management' and 'the Board', summarising:

- The status of 'live' internal audit reports;
- an update on progress against the annual audit plan;
- a summary of internal audit performance, planning and resourcing issues; and
- a summary of significant issues that impact on the Chief Internal Auditor's annual opinion.

Internal audit reviews culminate in an opinion on the assurance that can be placed on the effectiveness of the framework of risk management, control and governance designed to support the achievement of management objectives of the service area under review. Assurance opinions are categorised as follows:

Substantial	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable / Adequate	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

3. Performance dashboard





Compliance with Public Sector Internal Audit Standards

An 'External Quality Assessment' of the Southern Internal Audit Partnership was undertaken by the Institute of Internal Auditors (IIA) in September 2020. The report concluded:

'The mandatory elements of the IPPF include the Definition of Internal Auditing, Code of Ethics, Core Principles and International Standards. There are 64 fundamental principles to achieve with 118 points of recommended practice. We assess against the principles. It is our view that the Southern Internal Audit Partnership conforms to all 64 of these principles.

We have also reviewed SIAP conformance with the Public Sector Internal Audit Standards (PSIAS) and Local Government Application Note (LGAN). We are pleased to report that SIAP conform with all relevant, associated elements.'

4. Analysis of 'Live' audit reviews

Audit Review	Report Date	Audit Sponsor	Assurance Opinion	Total Not Management Accepted Action(s)		Not Yet Due	Complete	Overdue		
								L	M	Н
Governance Compliance	Feb 2019	Corp	Limited	3	0	0	2		1	
Home to School Transport	Mar 2019	DH&T	Limited	4	0	0	3	1		
Special Guardianship Orders	May 2019	DC&FS	Limited	24	0	0	22		2	
E-Income	Jun 2019	F&SS	Adequate	1	0	0	0	1		
Payroll and Employment Administration	July 2019	HR&OD	Adequate	10	0	0	9	1		
MSS	July 2019	Corp	Adequate	1	0	0	0	1		
Retained Firefighters	Sep 2019	CFO	Adequate	12	0	0	11		1	
Intentionally Homeless – Financial Control	Dec 2019	DC&FS	Limited	11	0	0	10			1
Application Review - Mosaic	Dec 2019	F&SS	Adequate	2	0	0	1		1	
External Placements	Jan 2020	DC&FS	Limited	5	0	0	4			1
Civil Parking Arrangements	Jan 2020	DH&T	Adequate	9	0	0	4		1	4
Document Management & Retention	May 2020	DC	Adequate	8	0	0	5		3	
Accounts Payable	May 2020	F&SS	Adequate	4	0	0	0		4	
Quality Assurance Framework	Jun 2020	DASS	Limited	9	0	1	5		2	1
Fraud Proactive – Purchasing Cards	Aug 2020	F&SS	Limited	7	0	0	6		1	
Capital Programme Governance	Aug 2020	DP&A	Adequate	2	0	0	1	1		
Travel Portal	Sep 2020	F&SS	Adequate	7	0	0	6	1		
Highways Asset Protection	Sep 2020	DH&T	Adequate	6	0	0	5		1	
Companies House – NFI (Proactive Fraud)	Sep 2020	L&A	Limited	9	0	3	3		3	
Investment Plan (CS)	Oct 2020	DC&FS	Adequate	6	0	1	3	2		
Special Educational Needs	Oct 2020	DC&FS	Limited	6	0	3	3			
Procurement	Oct 2020	F&SS	Adequate	3	0	1	2			
Crawley Schools PFI report	Dec 2020	DP&A	Adequate	4	0	4	0			

Audit Review	Report Date	Audit Sponsor	Assurance Opinion	Total Management Action(s)	Not Accepted	Not Yet Due	Complete	0	Overdue	
								L	M	Н
Employers Contributions / Relationships	Dec 2020	F&SS	Reasonable	8	0	7	1			
Total									20	7
Overdue Management Actions - Direction of travel since November 2020 progress report									-3	-9

Audit Sponsor Chief Executive Executive Director Place Services Director of Highways and Transport (DH&T) Chief Fire Officer (CFO) Director of Human Resources and Organisational Development Director of Environment and Public Protection (DE&PP) (HR&OD) Director of Property and Assets (DP&A) Director of Communities (DC) **Executive Director, Adults & Health and Statutory DASS (DASS) Executive Director Resource Services** Director of Law and Assurance (DL&A) **Executive Director of Children, Young People and Learning** Director of Finance and Support Services (DF&SS) Director of Children and Family Services (DC&FS)

5. Executive Summaries of reports published concluding a 'Limited' or 'No' assurance opinion

Director of Education and Skills (DE&S)

There have been no new reports published concluding a "limited" assurance opinion, since our last progress report.

6. Planning & Resourcing

The internal audit plan for 2020-21 was approved by the County Council's Executive Leadership Team and the Regulation, Audit & Accounts Committee in July 2020.

The audit plan remains fluid to provide a responsive service that reacts to the changing needs of the County Council. Progress against the plan is detailed within section 7.

7. Rolling Work Programme

Audit Review	Sponsor	Scoping	Audit Outline	Fieldwork	Draft Report	Final Report	Assurance Opinion	Comment
Dual Use Agreements	P&A	✓	✓	✓	Apr 20			
Governance – COVID	Corporate	✓	✓					Q3
Health and Safety / Staff Welfare / Wellbeing / Performance Management	Corporate	✓	✓	✓				Q2
Market Underwriting / Contract Management – Supply chain	Corporate	✓	✓	✓	Dec 20			Q2
Emergency Planning / Business Continuity / Service resilience	Corporate	✓	✓	✓				Q2
Central Government Grants (allocation)	Corporate	✓	✓	✓				Q2
PPE Cell	Corporate	✓	✓	✓	Jul 20	Sep 20	Reasonable	
Recovery	Corporate							Q4
Health and Safety	DHR&OD	✓						Q4
Corporate Governance	DL&A							Q3
Corporate Projects Support	Corporate	✓						Q1-4
Risk Management	DFSS	✓	✓	✓				Q2
Annual Governance Statement	DL&A	n/a	n/a	n/a	n/a	n/a	n/a	
Procurement (sub £100k)	DFSS	✓	✓	✓				Q3
Financial Resilience	DFSS	✓						Q4

Audit Review	Sponsor	Scoping	Audit Outline	Fieldwork	Draft Report	Final Report	Assurance Opinion	Comment
Debt Recovery / Write off	DFSS / DL&A	✓	✓	✓	Dec 20			Q3
Grant Returns	DFSS	n/a	n/a	✓	n/a	n/a	n/a	5 completed to date
Pensions (Employer Contributions & relationships)	DFSS	✓	✓	✓	Nov 20	Dec 20	Reasonable	
Follow up of Limited Opinion IT Audits	DFSS	✓	✓	✓	Sep 20	Oct 20	n/a	
Cyber Security	DFSS							Q4
Cloud Service Provisioning	DFSS	✓						Q3
Endpoint & Peripheral Provisioning	DFSS							Q4
Email & Document Management	DFSS	✓						Q3
Highways Statutory Inspections	DHT&P	✓	✓	✓				Q3
Ash Dieback	DHT&P	✓	✓	✓				Q3
Home to School Transport	DHT&P	✓						Q4
Climate Change Strategy	DE&PP	✓						Q4
Children, Young People and Learning Transformation Programme (Governance)	EDCYP&L	✓	✓					Q2
Children, Young People and Learning Transformation Programme (Workstreams)	EDCYP&L							Q4
Special Guardianship Allowances	EDCYP&L	✓	✓	✓	Oct 20	Oct 20	Reasonable	
Children's – P-Cards	EDCYP&L	✓	✓	✓				Q2
School Thematic Review(s)	EDCYP&L	✓						Q4
Children Safeguarding (QAF)	EDCYP&L	✓	✓					Q3
SFVS	EDCYP&L	✓	✓	✓	n/a	n/a	n/a	Q1 & Q4
School Traded Services	EDCYP&L	✓	✓	✓				Q3
Think Family	EDCYP&L	✓	✓	✓	n/a	n/a	n/a	
Approved Mental Health Professionals (AMHPs)	EDA&H	✓						Q4
S75 Mental Health	EDA&H	✓						Q4

Audit Review	Sponsor	Scoping	Audit Outline	Fieldwork	Draft Report	Final Report	Assurance Opinion	Comment
Establishment Thematic Review(s)	EDA&H	✓	✓ ✓	✓	Кероп	пероп	Ориноп	Q3
Data Quality (Adults)	EDA&H	✓						Q4
Adults Safeguarding Post COVID19	EDA&H	✓						Q3
S75 Governance	JSDC	✓	✓					Q3
Multi-Disciplinary Consultant (Contract)	DP&A	✓	✓					Q3
Management of restructures	DHR&OD	✓	✓	✓	Nov 20			Q2
Recruitment of Interims	DHR&OD	✓	✓	✓	Sep 20	Oct 20	Reasonable	
Health and Safety - FRS	CFO	✓	✓					Q3
Safe and Well Visits	CFO	✓	✓					Q3
Programme Management Office	CFO	✓						Q4
Grey Book Contracts	CFO	✓						Q4
Contract Management (Grasstex)	DFSS							Q4
SEND (Special Educational Needs)	EDCYP&L							
Data Quality (Children's)	EDCYP&L							
Self Help in Schools	DP&A	✓						Q4
Compliance with HR requirements	DHR&OC							
IR35	DHR&OC	✓						Q4

Reviews remain within the plan for completion during 20/21, however have been identified as those with greatest potential to defer to Q1 21/22 or have other sources of assurance contributing to the overall framework of governance, risk, and control.

8. Adjustments to the Internal Audit Plan (Since Last Progress Report)

Audit reviews removed from the plan (since last progress report)							
Adults Development Plan	Defer to 21/22. Departmental pressures due to COVID 19						
School Reviews	Restrictions of visits due to COVID19						
Adult Commissioning	Defer to 21/22. Departmental pressures due to COVID 19						
Premises Risk Management	Implementing the PRM process in January to April 2021 utilising new software system and App, go live in April 2021. Move into Q2/3 next year with audit in time for the next HMICFRS.						
Retained Duty System	Service implementing changes following their HMI inspection and are aware of issues						

Audit reviews added to the plan (since last progress report)						
S75 Mental Health	Scoped as a separate review (formerly part of the AMHPs audit)					

Annexe 1

Overdue 'High Priority' Management Actions

Quality Assurance Framework - Limited

Observation: There is a documented Quality Assurance Framework in place within Adults Services. This was created in 2013 and was last reviewed in October 2019.

This review of the framework was completed in isolation to the review of the new Safeguarding Adults Board Quality Assurance Framework (published in November 2019), and therefore this missed the opportunity to bring the two assurance documents in line with each other. The Author of the QAF does not report into the Head of Safeguarding and Quality.

Observation: Whilst there is a mechanism for feeding back learning from the QAF, the Framework does not identify how the authority will verify that this learning has been embedded within Adult's services and therefore is not closing the loop in the assurance process, providing a continuous process

In comparison the WSSAB QAF identifies that a learning and review framework will be in place to enable lessons to be learnt and where there have been poor outcomes to ensure that lessons learned are applied in practice.

Management Action	Original Due Date	Revised Due Date	Latest Service Update
Align the QAF with the Safeguarding QAF and where possible children QAF: Including identifying learning and changes in practice to be tested / evidenced based (embedding best practice)	31.07.2020	31.01.2021	A revised draft QAF is to be presented and discussed along with quality at the new performance board chaired by the Executive Director of Adults and Health (DASS). The meeting is to take place on the 13 th January 2021. Once these details have been agreed and finalised the revised QAF will be formally launched.

External Placements - Limited

Observation: There were no commissioning strategies in place for either Adults or Children's services. An effective commissioning strategy should help identify need, allocate resources and procure provider(s) to meet service need within available means.

Management Action	Original Due Date	Revised Due Date	Latest Service Update
Produce and publish the adults commissioning strategy aligned to the Adult Social Care Vision and Strategy 2019 – 2021. Finalise the draft Older People Market Position Statement.	31.01.20	30.11.20	The service has Market Position Statements for Lifelong Services issued November 2019 and Older People, this is currently in draft and the intention is to publish this alongside the Commissioning Strategy. Children Services have provided their Children and Young People's Sufficiency Strategy which
			runs to 2021.

Intentionally Homeless - Limited

Observation: Housing Plans, stating/agreeing the scope of West Sussex County Council's financial responsibility for an Intentionally Homeless Family are not routinely used by Social Workers when assessing families. This would give clear instruction to the Accommodation Team of what is required.

Management Action	Original Due Date	Revised Due Date	Latest Service Update
Following development of a model create practice standards for Children's Social Care and Accommodation Team for IH families.	31.03.2020	31.01.2021	Required S17 policy sign off to inform the practice standards and the processes. S17 guidance has been signed off. Next action is for the completion of the IH practice guidance which is in progress.

Civil Parking Arrangements - Adequate

Observation: The signed agency agreements with the districts/boroughs require a monthly reconciliation of income and expenditure for the on-street parking account and the Joint Enforcement Account. The agreements state that the reconciliations should be forwarded to the County Council each month with supporting documentation so that the council can understand the figures in the reconciliation.

Discussions with four district and borough Parking Managers confirmed that although monthly statistical information for on and off-street parking and enforcement is sent, formal reconciliations of income and expenditure are not. One of the councils sends a quarterly reconciliation to the County Council, but the remaining councils only do this at year end.

Additionally, no supporting information other than the statistical reports has been sent to the County Council as required by the agency agreements.

The County Council has not enforced the requirement for monthly reconciliations, nor requested further supporting documentation.

Management Action	Original Due Date	Revised Due Date	Latest Service Update		
To raise the reconciliation issues with each DC/BC's, vary the Agency	31.01.2020	01.04.2021	Quarterly Financial Reconciliations – were		
Agreements and get agreement to the variations from the DC/BC's			intended to go alongside the reports but some		
			of the DCs/BCs have stated that they do not		
			wish to change the financial arrangements we		
			have with them mid-way through the financial		
			year. Therefore, appropriate to start in April		
			2021. Some DCs/BCs did also state that they		
			would not recognise the new arrangements		
			until the Agency Agreements had been signed		
			as they do impact upon their end of year		
			income.		
Supporting information (i.e. CPE Reports) will be confirmed with each DC/BC as well as the IT supplier with the first quarterly reports to follow by Spring 2020.	31.03.2020	31.12.2020	Quarterly Reports – The template for the new quarterly reports has been largely completed and some authorities are starting to send through draft versions. The expectation is that all authorities be able to submit reports for Q3 (Oct – Dec) Therefore target December as a completion date for these reports. These reports will also include compliance surveys.		

The Agency Agreements have been re-drafted to ensure consistency and	31.01.2020	01.04.2021	In the final stages of drafting the variations to
understanding and updated policy			each Agency Agreement and resource in Legal
			Services have been made available to assist.
			Plan to have the Agreements completed
			(including being signed off by each DC/BC) by
			the end of December but the actions arising
			from the variations would not become
			effective until April 2021. (revised date for
			completion.)

Observation: The agency agreements require the districts and boroughs to provide WSCC with monthly statistical reports providing a variety of detailed information which is used by the Parking Strategy Team Manager at WSCC for financial modelling purposes.

Although we found there were detailed reports being sent from three of the districts/boroughs tested, we were informed by WSCC staff that one of the councils had not sent any reports to them since June 2018.

Management Action	Original Due Date	Revised Due Date	Latest Service Update		
Supporting information (i.e. CPE Reports) will be confirmed with each DC/BC	31.03.2020	31.12.2020	Reports were expected to go live from July 1st,		
within this same period with the first quarterly reports to follow in Spring			2020 with the first report expected October.		
2020. I am currently awaiting confirmation from the IT supplier that they can			The go live for all reports should now be		
provide the necessary information.			December.		

Annexe 2

Overdue 'Low & Medium Priority' Management Actions

Audit Review	Report	Opinion	Priority	Due Date	Revise Due
	Date				Date
Governance Compliance	Feb 2019	Limited	Medium	30.09.19	31.12.20
Home to School Transport	Mar 2019	Limited	Low	30.04.20	30.11.20
Special Guardianship Orders	May 2019	Limited	Medium	31.07.19	30.09.20
			Medium	30.09.19	30.09.20
E-Income	June 2019	Adequate	Low	31.12.19	31.04.21
Payroll and Employment Administration	July 2019	Adequate	Low	31.07.19	31.12.20
MSS	July 2019	Adequate	Low	31.07.19	31.03.21
Retained Firefighters	Sept 2019	Adequate	Medium	31.10.19	30.09.20
Application Review - Mosaic	Dec 2019	Adequate	Medium	31.01.20	31.01.21
Civil Parking Arrangements	Jan 2020	Adequate	Medium	31.01.20	01.04.21
Document Management & Retention	May 2020	Adequate	Medium	31.07.20	31.01.21
		·	Medium	31.07.20	30.06.21
			Medium	30.09.20	31.01.21
Accounts Payable	May 2020	Adequate	Medium	31.07.20	31.10.20
			Medium	31.07.20	31.10.20
			Medium	31.07.20	31.10.20
			Medium	31.07.20	31.10.20
Information Governance – Document Management and Retention	May 2020	Adequate	Medium	31.07.20	31.01.21
			Medium	31.07.20	30.06.21
			Medium	30.09.20	31.01.21
Quality Assurance Framework (Safeguarding)	Jun 2020	Limited	Medium	31.05.20	31.10.20
			Medium	31.08.20	31.03.21
Fraud Proactive – Purchasing Cards	Aug 2020	Limited	Medium	31.01.20	31.10.20
Capital Programme Governance	Aug 2020	Adequate	Low	30.06.20	28.02.21
Travel Portal	Sep 2020	Adequate	Low	31.05.20	30.11.20
Highways Assets (Recoverable)	Sep 2020	Adequate	Medium	01.07.20	01.11.20
Investment Plan (CS)	Oct 2020	Adequate	Low	30.11.20	TBC
			Low	30.11.20	TBC