ABERDEEN CITY COUNCIL

| COMMITTEE | Audit, Risk and Scrutiny Committee |
|--------------------|---|
| DATE | 26 June 2019 |
| EXEMPT | No |
| CONFIDENTIAL | No |
| REPORT TITLE | Internal Audit Reports – Follow-up of Agreed Recommendations |
| REPORT NUMBER | IA/19/010 |
| DIRECTOR | N/A |
| REPORT AUTHOR | David Hughes |
| TERMS OF REFERENCE | 2.3 |

1. PURPOSE OF REPORT

1.1 This report advises the Committee of progress made by Services with implementing recommendations that have been agreed in Internal Audit reports.

2. **RECOMMENDATIONS**

The Committee is requested to:

2.1 Review, discuss and comment on the issues raised within this report and the attached appendices.

3. BACKGROUND / MAIN ISSUES

- 3.1 The Public Sector Internal Audit Standards require that Internal Audit monitors the implementation of agreed recommendations until they are implemented by management. The Corporate Management Team and the Audit, Risk and Scrutiny Committee receive a report from Internal Audit at each of its meeting which shows progress made.
- 3.2 However, circumstances may change following completion of an Internal Audit. Having investigated implementation more fully, a recommendation may, for example, take longer to implement, or the cost of implementation may be higher, than originally anticipated. In these circumstances either more time may be required, or management may conclude, based on the risk to the organisation, that the recommendation should no longer be implemented. Where this is the case, management will make recommendations regarding how the agreed recommendation should be treated.

- 3.3 The attached appendices show progress made by Services with completing agreed Internal Audit recommendations, based on assurances received from officers tasked with their implementation and independent checks where appropriate. Where all recommendations contained in individual reports issued before 1 April 2019 have been completed, these are no longer shown in the appendices.
- 3.4 Where recommendations have not been completed by their original due date, reasons are provided along with recommendations from management (where appropriate) regarding how and when the agreed Internal Audit recommendation will be concluded or whether it should no longer be implemented.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from the recommendations of this report.

5. LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from the recommendations of this report.

6. MANAGEMENT OF RISK

6.1 The Internal Audit process considers risks involved in the areas subject to review. Any risk implications identified through the Internal Audit process are detailed in the resultant Internal Audit reports. Recommendations are made to address the identified risks and Internal Audit follows up progress with implementing those that are agreed with management. Those not implemented by their agreed due date are detailed in the attached appendices.

7. OUTCOMES

- 7.1 There are no direct impacts, as a result of this report, in relation to the Local Outcome Improvement Plan Themes of Prosperous Economy, People or Place, or Enabling Technology, or on the Design Principles of the Target Operating Model.
- 7.2 However, Internal Audit plays a key role in providing assurance over, and helping to improve, the Council's framework of governance, risk management and control. These arrangements, put in place by the Council, help ensure that the Council achieves its strategic objectives in a well-managed and controlled environment.

8. IMPACT ASSESSMENTS

| Assessment | Outcome | | | | | |
|------------------|--|--|--|--|--|--|
| Equality & Human | An assessment is not required because the | | | | | |
| Rights Impact | reason for this report is for Committee to | | | | | |
| Assessment | review, discuss and comment on the outcome | | | | | |
| | of an internal audit. As a result, there will be | | | | | |

| Data Protection Impact Assessment | no differential impact, as a result of the proposals in this report, on people with protected characteristics. Not required |
|--|--|
| Duty of Due Regard / Fairer Scotland Duty | Not applicable |

9. APPENDICES

- 9.1 Appendix A Position with Agreed Recommendations Summary.
- 9.2 Appendix B Position with Agreed Recommendations Cross Service.
- 9.3 Appendix C Position with Agreed Recommendations Customer.
- 9.4 Appendix D Position with Agreed Recommendations Operations.
- 9.5 Appendix E Position with Agreed Recommendations Resources.
- 9.6 Appendix F Position with Agreed Recommendations Health and Social Care Partnership.
- 9.7 Appendix G Governance.

10. **REPORT AUTHOR DETAILS**

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APPENDIX A – SUMMARY

POSITION WITH AGREED RECOMMENDATIONS AS AT 13 JUNE 2019

The following table provides a summary of progress being made by Services with completing agreed recommendations.

On 30 April 2019, the Committee was advised that, as at 16 April 2019, there were 14 recommendations which were due to have been completed by 31 December 2018 which were not fully complete. This has now reduced to 8.

The total not fully complete, which had an original due date of before 30 April 2019, is 21. Full details relating to progress, on a report by report basis, are shown in appendices B to G.

| SERVICE | Agreed in reports shown in Appendices B to G | Due for completion by 28.02.19 | Confirmed complete by Service | New in March and April 2019 | Confirmed complete by Service | Not fully complete by original due date | Major | Significant | Important |
|----------------------|--|--------------------------------------|-------------------------------------|-----------------------------------|-------------------------------------|--|-------|-------------|-----------|
| Cross Service | 27 | 1 | 1 | 2 | 2 | 0 | 0 | 0 | 0 |
| Commissioning | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Customer | 21 | 3 | 3 | 7 | 4 | 3 | 0 | 1 | 2 |
| Operations | 24 | 17 | 16 | 6 | 0 | 7 | 1 | 6 | 0 |
| Resources | 38 | 32 | 27 | 6 | 2 | 9 | 0 | 8 | 1 |
| Health & Social Care | 50 | 34 | 32 | 0 | 0 | 2 | 0 | 2 | 0 |
| Governance | 3 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |
| Total | 163 | 88 | 80 | 22 | 9 | 21 | 1 | 17 | 3 |

KEY TO COLOURING USED IN FOLLOWING APPENDICES

Recommendation Grading:

| Grading | Definition |
|-------------|---|
| Major | The absence of, or failure to comply with, an appropriate internal control which could result in, for example, a material financial loss, or loss of reputation. Financial Regulations have been consistently breached. |
| Significant | Addressing this issue will enhance internal controls. An element of control is missing or only partial in nature. The existence of the weakness identified has an impact on a system's adequacy and effectiveness. Financial Regulations have been breached. |
| Important | Although the element of internal control is satisfactory, a control weakness was identified, the existence of the weakness, taken independently or with other findings does not impair the overall system of internal control. |

Length of time overdue



APPENDIX B

CROSS SERVICE

| | | | Number of Recommendations | | | | | | |
|--------|---------------------------|------------------|---------------------------|-------------------------------|---------------------------|-------------------------|----------------------------|--|--|
| Report | Report Title | Date | Agreed in | Due for | Confirmed | Not implemented | Grading of | | |
| Number | | Issued | Report | implementation by 30.04.19 | Implemented by Service | by original due date | overdue recommendations | | |
| | | | | | | | | | |
| AC1914 | Procurement Compliance | April 2019 | 15 | 0 | 0 | 0 | 0 | | |
| | | I | | | | | | | |
| AC1918 | Health and Safety | February 2019 | 12 | 3 | 3 | 0 | 0 | | |

APPENDIX C

CUSTOMER

| | | | | | Nu | umber of Recomm | nendations | |
|--|--|---|---------------------------|--|--|---|--|---|
| Report Number | Report Ti | tle | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations |
| AC1909 | Timeshe Allowand | | August 2018 | 7 | 4 | 4 | 0 | 0 |
| AC1917 | NPS Hou | ising System | February 2019 | 14 | 6 | 3 | 3 | 1 Significant 2 Important |
| The posit | ion with the | e overdue recom | mendations is | as follows: | | | | |
| Chief Offi | ief Officer Recommendation | | on | Grading / Due Date | Position | | | |
| Early Inte and Com Empower | munity | Risks of not carrying out tests should be assessed and documented where scheduled tests are not completed (2.3.3) | | Important March 2019 | currently identifying required. Where tests are of document the risk 2019. | ng critical function deemed not requi k. This is schedu | s a comprehensive te nality to determine wh red, the Service will w led to be completed b | ere tests are ork to assess and y the end of July |
| and Com | Intervention Community owermentThe Systems Team work plan should be updated to include 2018/19 team tasks (2.3.6) | | Significant March 2019 | The Service has advised that the Systems Team has specific work tasks and is currently exploring more efficient and automated methods of monitoring progress. This will be complete by the end of August 2019. | | | | |
| Early Intervention and Community Empowerment | | introduce specific new user | | Important April 2019 | (IT Service Mana | gement tool) has | existing new user form been changed to inco is scheduled to be liv | orporate NPS |

APPENDIX D

OPERATIONS

| | | | | | Nu | umber of Recomn | nendations | |
|-------------------------|-----------------------|---|-----------------|--------------------------------------|--|--|---|--|
| Report Number | Report Tit | le | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations |
| AC1602 AW | Craft Wor and Cond | rkers Terms litions | October 2015 | 9 | 9 | 8 | 1 | 1 Major |
| The posit Chief Offi | | overdue recommendation | | as follows: Grading / Due Date | Position | - | | |
| Operation | ns and e Services | The Service sho renegotiate the based on currer practice (2.2.6) | Agreement | Major June 2016 | complete I Committee complete a Committee the near full Committee complete I Committee to review a transformation a committee for agreement, with I Subject to the submittee for aplaction has been of the submittee for aplaction for the submittee for aplacting for the submittee for the subm | by December 201 e advised on 23 F as soon as possible advised on 22 J uture. e advised on 26 S by June 2018. e advised on 25 S and will be include ation programme. e advised on 4 De by April 2019 e advised on 30 A 19. e from the Service Unions and emplo ccess of these ne ne 1 October 2019 proval. The Service delayed on severa nd it is anticipated | ebruary 2017 that this ole in 2017. une 2017 that this wo September 2017 that t September 2018 that t ed in the work-plan fo | s would be ould be complete in his would be his is to be subject r delivery of the s would be uld be resolved by in the proposed in June 2019. ed that a report will Governance ogress with this rcumstances out |

| | | | | Nu | umber of Recomn | nendations | |
|------------------|--------------|----------------|---------------------|--|--|--|--|
| Report Number | Report Title | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations |

| AC1817 | Vehicle U | Isage | January 2018 | 8 | 8 | 4 | 4 | 4 Significant |
|--|--|---|------------------------|-------------------------------------|--|--|---|-------------------|
| The posit | ion with the | overdue recom | mendations is | as follows: | | | | |
| Chief Offi | cer | Recommendati | on | Grading / Due Date | Position | | | |
| Operation Protective | ns and e Services | The Council sh and roll out a si | ngle policy | Significant | developing a sing | le policy on these | ussions are on-going e issues. Following o | consultation, the |
| on the use of Council owned vehicles, ensuring this includes whether and in which circumstances non- business use or carriage of passengers is allowed (2.1.4) | | April 2019 | allow for the com | pletion of the disc | e appropriate commi sussions, consultation be complete in Octo | ns and relevant | | |
| | Operations and Protective ServicesFleet should ensure that all Services have access to regular reports on vehicle use, know how to check these and what issues to consider (2.2.7) | | Significant April 2019 | of a telematics sy 2019. The aim is | stem, a tender fo , subject to the co | will be resolved throu r which is due out to ompletion of the proc to produce reports f | urement process | |
| Operation Protective | is and Services | Fleet utilisation reviewed corpo maximise efficie | rately to | Significant April 2019 | As for 2.2.7, abov | /e. | | |

| | | | | Nu | umber of Recomm | nendations | |
|------------------|--------------|----------------|---------------------|---------------------------|--------------------------|------------------------------------|-----------------------|
| Report Number | Report Title | Date Issued | Agreed in Report | Due for implementation | Confirmed Implemented | Not implemented by original due | Grading of overdue |
| | | | | by 30.04.19 | by Service | date | recommendations |

(AC1817 – Vehicle Usage – Continued)

| Chief Officer | Recommendation | Grading / Due Date | Position |
|---------------------------------------|---|------------------------|----------------------|
| Operations and Protective Services | A corporate review is required on Services allowing employees to take vehicles home and use them for day to day commuting, to ensure such instances present a net benefit to the Council (2.2.22) | Significant April 2019 | As for 2.1.4, above. |

| | | | | | Nu | Imber of Recomm | nendations | |
|--------------------|-------------------------------|---|---|---------------------------|--|--|--|--|
| Report Number | | | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations |
| AC1903 | Devolved School Management | | November 2018 | 7 | 6 | 4 | 2 | 2 Significant |
| The posit | ion with the | overdue recomn | nendations is | as follows: | | | | |
| Chief Offi | Chief Officer Recommendati | | on | Grading / Due Date | Position | | | |
| | e Landlord | The DSM Budge Formulae and C procedure and C Assurance Fran Financial Manage schools procedu be updated to re devolved budge arrangements (2) | Operational Quality nework - gement ure should eflect current t 2.1.8) | Significant March 2019 | Internal Audit is a | | | |
| Corporate Landlord | | A procedure should be S prepared covering the DSM | | Significant April 2019 | Internal Audit is a | waiting an update | e on progress. | |

<u>APPENDIX E</u>

RESOURCES

| | | | | | Nu | umber of Recomn | nendations | | |
|----------------------------|------------|--|---|--------------------------|---|--|--|--|--|
| Report I Number | • | | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations | |
| | | | September 2017 | 9 | 9 | 6 | 3 | 3 Significant | |
| The positio | n with the | overdue recomr | nendations is | as follows: | | | | | |
| Chief Officer Recommendati | | on | Grading / Due Date | Position | | | | | |
| Corporate Landlord | | The Service sho formalise the pr used to demons compliance with Corporate Land Responsibilities cyclical mainten activities (2.2.3) | ocedures strate n its lord and other nance | Significant June 2018 | complete by October 2018. | | | ernal Audit was has been agreed sks, through a al Audit has | |
| Corporate Landlord | | The Service should ensure data regarding its Corporate Landlord Responsibilities is maintained centrally, accurately and up to date (2.3.8) | | Significant June 2018 | Committee advised on 25 September 2018 that this would be complete by October 2018. Committee advised on 14 February 2019 that Internal Audit was awaiting an update on progress from the Service. The latest update from the Service is that records of what works are undertaken, who has responsibility for works, what data is recorded and where it is held has been collated. From this a reporting dashboard is being developed to highlight weakness and give greater assurance. This will be piloted during June 2019. | | | | |

| | | | Number of Recommendations | | | | | | |
|--------|--------------|--------|---------------------------|----------------|-------------|-----------------|-----------------|--|--|
| Report | Report Title | Date | Agreed in | Due for | Confirmed | Not implemented | Grading of | | |
| Number | | Issued | Report | implementation | Implemented | by original due | overdue | | |
| | | | | by 30.04.19 | by Service | date | recommendations | | |

| Chief Officer | Recommendation | Grading / Due Date | Position |
|--------------------|---|-----------------------|---|
| Corporate Landlord | The Service should ensure it has assurance that all property in which the Council has an interest is statutorily compliant (2.3.13) | Significant June 2018 | Committee advised on 25 September 2018 that this would be complete by October 2018. Committee advised on 14 February 2019 that Internal Audit was awaiting an update on progress from the Service. The latest update from the Service is that records of what works are undertaken, who has responsibility for works, what data is recorded and where it is held has been collated. From this a reporting dashboard is being developed to highlight weakness and give greater assurance. This will be piloted during June 2019. |

| | | | Number of Recommendations | | | | | |
|------------------|--------------|----------------|---------------------------|--|--|--|--|--|
| Report Number | Report Title | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations | |

| AC1819 | Capital ContractsFebruary 2018 | | 8 | 8 | 7 | 1 | 1 Significant | | |
|-------------|--|--|-----------------------|-----------------------|---------------------|------------------------------------|-----------------|--|--|
| The positi | The position with the overdue recommendations is as follows: | | | | | | | | |
| Chief Offic | Chief Officer Recommendation | | Grading / Due Date | Position | | | | | |
| Capital | apital The Service should review estimating and scheduling to ensure it can demonstrate that best value is being achieved (2.4.12) | | to | The Service has 2019. | confirmed that this | s will be complete by [·] | the end of June | | |

| | | | | | Nu | umber of Recomm | nendations | | | |
|---|--------------------------------|--|-------------------------|---------------------------|---|--|--|--|--|--|
| Report Number | | | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations | | |
| AC1823 | Fixed Asset RegisterAugust2018 | | | 7 | 7 | 4 | 3 | 3 Significant | | |
| The posit | ion with the ove | erdue recomm | nendations is a | as follows: | | | | | | |
| Chief Officer Recommendation | | | on | Grading / Due Date | Position | | | | | |
| Finance | inv res pro | e Service sho vestigate the r serve errors a ocedures to a .4.4) | evaluation nd update | Significant March 2019 | The Service has advised that as this is a year-end procedure this is currently being worked on. The procedure will be updated by the end of June 2019. | | | | | |
| Finance Accounting tra should be refle ledger (2.6.1a | | ould be reflec | | Significant April 2019 | The Service has advised that, due to resourcing issues, this has not been undertaken, but work is scheduled to begin on this once the Annu Accounts audit has been completed. This will now be complete by the er of September 2019. | | | | | |
| recond registe | | e ledger shou conciled to the gister and Fina atements (2.6 | e fixed asset ancial | Significant April 2019 | As for 2.6.1a, abc | ove. | | | | |

| | | | Number of Recommendations | | | | | | |
|------------------|-------------------------------------|---|---------------------------|---|--------------------------|------------------------------------|--------------------|--|--|
| Report Number | Report Title | Date Issued | Agreed in Report | Due for implementation | Confirmed Implemented | Not implemented by original due | Grading of overdue | | |
| | | | | by 30.04.19 | by Service | date | recommendations | | |
| | | A | 4.4 | | 40 | • | | | |
| AC1902 | Debtors System | August | 14 | 14 | 12 | 2 | 1 Significant | | |
| | | 2018 | | | | | 1 Important | | |
| Chief Offi | cer Recomme | ndation | Grading / Due Date | Position | | | | | |
| Finance | updated as | Procedures should be updated as required and | | Committee advised on 14 February 2019 that this would be complete by May 2019. | | | | | |
| | issued to appropriate staff (2.1.4) | | December 2018 | The latest update from the Service is that there are a large number of separate procedures that are now being updated following completion of the main year end tasks. This will now be completed by the end of June 2019 | | | | | |

| | | | 2019. |
|---------|---|-------------------------------|---|
| Finance | The Service should revise aged debt reports to highlight where recovery action is required (2.7.6) | Important December 2018 | Committee advised on 14 February 2019 that this would be complete by June 2019. |

APPENDIX F

HEALTH AND SOCIAL CARE PARTNERSHIP

| | | | | | Nu | umber of Recomn | nendations | | | |
|--|------------------------------|------------------------------|---------------------------|--|---|--|--|--|--|--|
| Report Number | • | | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations | | |
| AC1617 | | | October 2016 | 21 | 21 | 20 | 1 | 1 Significant | | |
| Progress with the overdue recommendations is detailed below: | | | | | | | | | | |
| Chief Offic | Chief Officer Recommendation | | on | Grading / Due Date | Position | | | | | |
| Head of Strategy and Transformation (ACC H&SCP) The Service should fina and implement the Contributing to Your Ca and Support Policy and guidance (2.4.2) | | the Your Care licy and | Significant March 2017 | October 20 Committee complete b Committee September Committee complete b | 017. e advised on 23 N by April 2018. e advised on 8 Ma r 2018. e advised on 25 by March 2019. e advised on 30 A | une 2017 that this wo lovember 2017 that th ay 2018 that this would 5 September 2018 t April 2019 that this wo | is would be d be complete by hat this would be | | | |

| | | | Number of Recommendations | | | | | | |
|--------|--------------|--------|---------------------------|----------------|-------------|-----------------|-----------------|--|--|
| Report | Report Title | Date | Agreed in | Due for | Confirmed | Not implemented | Grading of | | |
| Number | | Issued | Report | implementation | Implemented | by original due | overdue | | |
| | | | | by 30.04.19 | by Service | date | recommendations | | |

| AC1828 | Care ManagementApril2018 | | 13 | 13 | 12 | 1 | 1 Significant | | | |
|---------------------------|---|--|----------------------------------|---|----|---|---------------|--|--|--|
| The positi | The position with the overdue recommendations is as follows: | | | | | | | | | |
| Chief Offic | Chief Officer Recommendation | | Grading / Due Date | Position | | | | | | |
| Chief Fina Officer (IJ | hief Finance fficer (IJB) The Service should ensure arrangements for budgeting, managing payments via CareFirst, and monitoring third party use of funds, are developed for SDS Option 2 (SDS Board action plan) (2.3.5) | | Significant September 2018 | Committee advised on 4 December 2018 that this would be complete by April 2019. Committee advised on 30 April 2019 that this would be complete by July 2019. | | | | | | |

| AC1919 | Criminal Justice | April 2019 | 8 | 0 | 0 | 0 | 0 |
|--------|------------------|------------|---|---|---|---|---|
| | | | | | | | |

| AC1920 | National Care Home | January | 8 | 0 | 0 | 0 | 0 |
|--------|--------------------|---------|---|---|---|---|---|
| | Contract | 2019 | | | | | |

APPENDIX G

GOVERNANCE

| | | Number of Recommendations | | | | | |
|------------------|--|---------------------------|---------------------|--|--|--|--|
| Report Number | Report Title | Date Issued | Agreed in Report | Due for implementation by 30.04.19 | Confirmed Implemented by Service | Not implemented by original due date | Grading of overdue recommendations |
| | | | | | | | |
| AC1916 | Prevention of Fraud, Bribery and Corruption | February 2019 | 3 | 2 | 2 | 0 | 0 |