ABERDEEN CITY COUNCIL

COMMITTEE	Audit, Risk and Scrutiny Committee
DATE	2 December 2021
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Internal Audit Progress
REPORT NUMBER	IA/21/011
DIRECTOR	N/A
REPORT AUTHOR	Colin Harvey
TERMS OF REFERENCE	2.2 and 2.4

1. PURPOSE OF REPORT

1.1 This report advises the Committee of Internal Audit's progress against the approved 2020/21 and 2021/22 Internal Audit plans.

2. RECOMMENDATIONS

It is recommended that the Committee:

2.1 Reviews, discusses and comments on the issues raised within this report and appendices

3. BACKGROUND/MAIN ISSUES

Internal Audit Plan 2020/21

- 3.1 The Internal Audit Plan for 2020/21 was originally approved by the Audit, Risk and Scrutiny Committee on 12 February 2020. However, due to the advent of the Covid-19 Pandemic, and changes to the Council's risk profile as a result, the plan was revisited by Internal Audit and, through consultation with management, a revised plan was approved by the Urgent Business Committee on 6 May 2020. The revised plan included an indicative date by when it was planned to report each audit to Committee. Progress against the plan has been reported to each subsequent meeting of the Committee.
- 3.2 As has been common practice in previous years, work was carried forward from the 2020/21 Internal Audit Plan and reported to subsequent meetings of the Audit, Risk and Scrutiny Committee during 2021/22. This reflects that the Internal Audit Plan is not restricted to a single financial year: The Internal Audit annual report provides an opinion on the continued application and suitability of the Council's internal control environment. The Internal Audit team refreshes and updates their understanding of that (and helps influence it by making recommendations) through a rolling

programme of work, which is currently determined once a year in advance of the new financial year commencing. A refreshed approach, including a multi-year Plan, is being developed to inform scheduling for 2022/23 onwards.

- 3.3 Previously agreed Internal Audit Plans included indicative dates by when it was planned to report the outcome of each audit to the Audit, Risk and Scrutiny Committee, up to and including the Committee's first meeting in the new financial year (typically May or June).
- 3.4 The table below sets out the extent to which work has been concluded, and carried forward, within previous financial years:

Year	Brought Forward	Planned April Year 1	Planned and Brought	Delivered April to March	Delivered April to June	Cancelled / Deferred	Carried Forward
		to June Year 2	Forward	Year 1	Year 2		
2015/16		35	35	16	9	7	12
2016/17	12	28	40	31	2	3	6
2017/18	6	31	37	29	4	1	7
2018/19	7	29	36	25	6	3	8
2019/20	8	29	37	24	0	1	12
2020/21	12	27	39	15	5	9	15
2021/22 (YTD)	15	24	39	11			

- 3.5 As can be seen in the figures, the impact of work carried forward on subsequent years can be significant. However, with the exception of 2020/21 the overall level of work delivered has remained broadly similar. During 2020/21 Internal Audit and audited service resources were constrained due to the impact of Covid 19.
- 3.6 Appendix A to this report shows progress with audits contained in the 2020/21 plan which have still to be concluded and reported to the Committee. All audits have commenced and the majority have been completed.
- 3.7 A summary of progress with the remaining 2020/21 Internal Audit Plan is shown in the following table:

2020/21 Planned Audit	by O	%				
Status	Oct- 20	Dec- 20	Feb- 21	May- 21	Total	
Complete	5	2	2	4	13	81%
Draft Report Issued	0	0	0	0	0	0%
Work in Progress	1	0	1	1	3	19%
Total	6	2	3	5	16	100

Internal Audit Plan 2021/22

- 3.8 The Internal Audit plan for 2021/22 was approved by the Audit, Risk and Scrutiny Committee on 24 February 2021. The plan detailed what Internal Audit anticipated being able to review in the year, assuming stability in resources available to the Section. The plan included an indicative date by when it was planned to report each audit to Committee, noting that these may be subject to change based on availability of resources within Clusters to respond to Internal Audit's enquiries, resources within Internal Audit, the risk profile of the organisation, and the extent to which processes are documented and complied with. These indicative dates were included in the Committee Business Planner.
- 3.9 As previously reported, Internal Audit's resources have been constrained due to the direct and indirect impacts of Covid 19, increased absences within the Section, and a series of vacancies following the departure of the former Chief Internal Auditor, recruitment for which has only recently concluded. The post will be filled from 6 January 2022.
- 3.10 Absence statistics remain high, including experienced members of the team. During 2020/21 over 200 days were lost due to absence, and 138 days absence have been recorded to date during 2021/22. This equates to over 10% of the Service's planned resources, and has impacted on conclusion and reporting of individual pieces of work pending reinstatement or reallocation.
- Opportunities to improve the efficiency of the team's work are being pursued where this will not impact on the level of assurance obtained and delivered. When the new Chief Internal Auditor takes up their post in January, the team will progress towards a full staffing complement to restore capacity currently lost through back-filling of posts.
- 3.12 Given the challenges set out above, the 2021/22 Internal Audit Plan has not progressed to the extent originally anticipated. This has had an impact on

meeting the indicative dates originally included in the Committee Business Planner to date.

3.13 Work is however progressing, with a summary shown in the following table:

2021/22 Planned	As at 16 November 2021						
Audit	b	y Origina	al Targe	t Commi	ittee Dat	е	%
Status	Jun- 21	Sep- 21	Dec- 21	Feb- 22	Jun- 22	Total	
Complete	1	1	0	0	0	2	10%
Draft Report Issued	0	0	0	0	0	0	0%
Work in Progress	1	2	2	0	1	6	29%
To Start	0	0	2	6	5	13	62%
Total	2	3	4	6	6	21	100

- 3.14 Appendix B to this report details the current position with audits contained in the 2021/22 plan agreed with the Audit Risk and Scrutiny Committee in February 2021. Work has been delayed commencing some of these audits, pending progress with concluding work carried forward from the previous year. Audited Services have also indicated continuing issues with their capacity to support Internal Audit's work as they seek to re-establish and where appropriate adjust operations following Covid 19.
- 3.15 Further consideration has therefore been given to prioritising the remaining audit work in line with the anticipated level of risk pertaining to each area. During 2020/21 lower-risk audits were added to a Reserve List, and thereafter removed or deferred following consultation with Officers and the Audit Committee. A similar approach to reviewing and re-prioritising the Audit Plan has been undertaken for 2021/22. The areas in which this is currently anticipated to have an impact on the 2022-23 Internal Audit Plan, have been highlighted in Appendix B.
- Whilst delivery of the Internal Audit Plan within 2021/22 is at risk due to the circumstances outlined at 3.9 above, the audits included therein remain a priority, and will be progressed as resources allow. Similar to previous years, this is likely to mean a proportion of the Audit Plan will be reported to the Committee in the following financial year, and the indicative dates for reporting audits to the Committee will be subject to delays.
- 3.17 In order to support the Chief Internal Auditor's annual report, prior to the end of the financial year assurance will be sought from relevant Services in respect of audited areas where a full review cannot be concluded within the

year. More detailed review of supporting evidence will be undertaken thereafter, and reported to the Audit, Risk and Scrutiny Committee as soon as practicable in the following financial year.

3.18 The Internal Audit plan for 2021/22 also included elements of consultancy and support work. A summary of progress with these activities is set out in Appendix C to this report.

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. Where planned progress is not maintained, there is a risk that sufficient work will not have been completed by the end of the financial year for Internal Audit to complete its annual opinion on the Council's control environment. This is being mitigated as set out in paragraphs 3.15-3.17 above.

7. OUTCOMES

- 7.1 There are no direct impacts, as a result of this report, in relation to the Council Delivery Plan, or the Local Outcome Improvement Plan Themes of Prosperous Economy, People or Place.
- 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
Impact Assessment	An assessment is not required because the reason for this report is to report Internal Audit's progress to Committee. As a result, there will be no differential impact, as a result of the proposals in this report, on people with protected characteristics.
Data Protection Impact Assessment	Not required

9. APPENDICES

- 9.1 Appendix A Progress with 2020/21 Internal Audit Plan
- 9.2 Appendix B Progress with 2021/22 Internal Audit Plan
- 9.3 Appendix C 2021/22 Internal Audit Consultancy Work

10. REPORT AUTHOR DETAILS

Colin Harvey, Chief Internal Auditor (Interim) colin.harvey@aberdeenshire.gov.uk (01467) 530701

APPENDIX A

PROGRESS WITH 2020/21 INTERNAL AUDIT PLAN

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021		Red Amber Green	Comment where applicable
Originally Planned f	for October 2020 Committee				
Consilium System	To provide assurance over system controls (to include access controls, system security and backups, interfaces, business continuity and contingency plans).	Audit Commenced Draft report due to be issued Draft report issued	14.01.21 08.03.21 tbc	Red	The assigned audito had sickness absences which have delayed progress. Service availability to progress the audit has been limited.
		Original Target Committee date Revised Target Committee Date	08.10.20 22.02.22	Red	Work in progress. Report anticipated February 2022.
Originally Planned f	for December 2020 Committee				
Mental Health and Substance Abuse	To provide assurance that appropriate processes are in place to manage and record support arrangements and that expenditure is adequately controlled, including	Audit Commenced Draft report due to be issued Draft report issued	19.01.21 31.03.21 13.08.21	Red	The assigned auditor has had sickness absences which have delayed progress.
	approval / management of discretionary support.	Original Target Committee date Revised Target Committee Date	09.12.20 02.12.21	Red	Complete

Presented to Committee

02.12.21

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021	Red Amber	Comment where applicable
			Green	

Originally Planned for February 2021 Committee (continued)

School / Pupil Security	To provide assurance that the	Audit Commenced	02.11.20	Red	Commenced
	Council has adequate arrangements	Draft report due to be issued	31.12.20		November 2020,
	regarding school security to include	Original Target Committee date	04.00.04	Dad	access and Service
	those in place to:	Original Target Committee date	24.02.21	Red	availability is
	•Control access to schools •Ensure that knives / weapons are	Revised Target Committee date	22.02.22		restricted due to Covid 19.
	not brought into schools •Know where pupils are during the				Due to revised Covid
	school day				measures applicable
	Escort vulnerable young people				between December
	3 1 3 1				2020 and February
					2021, the Service did
					not have capacity to
					assist Internal Audit's
					review. The Service was asked to provide
					a revised date for
					work to
					recommence.
					This was on hold
					pending return from
					school holidays. The
					Service then
					requested the audit
					commence following
					the October break.
					Report anticipated
					February 2022.

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021	Red Amber	Comment where applicable
			Green	

Originally Planned for May 2021 Committee

Capital Project	To provide assurance that the	Audit commenced	22.06.21	Red	Commenced June
Management	management and reporting of on-	Draft report issued			2021
	going capital projects is adequate	Service response			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	and that appropriate post completion	Original Target Committee date	10.05.01		Work in progress.
	reviews are completed so that lessons learned can be recorded and	Original Target Committee date Revised Target Committee date	12.05.21 02.12.21		Doloved due to
	acted upon.	Revised Target Committee date	02.12.21		Delayed due to Service availability
	acted apon.				and Auditor absence.
					Report anticipated
					February 2022.

APPENDIX B

PROGRESS WITH 2021/22 INTERNAL AUDIT PLAN

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021		Risk / Audit Priority Level	Proposal / Update
Originally Planned	for June 2021 Committee				
IT Infrastructure Resilience	To obtain assurance over the procurement and adequacy of the Council's IT infrastructure systems.	Audit Commenced Draft report due to be issued Revised Target Committee date	02.05.21 23.07.21 02.12.21	High (Risk to various aspects of Council business)	The audit was originally suspended pending the CO – Digital & Technology commencing in post. Service availability to progress the audit has been limited. Report anticipated June 2022.
Licensing Income	To provide assurance over the processes in place for controlling income from licensing applications.	Audit Commenced Draft report issued Final report agreed Revised Target Committee date	28.05.21 02.09.21 19.10.21 02.12.21	(Largely routine, financial	System access delayed due to service requirements. Complete

risks)

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021		Risk / Audit Priority Level	Proposal / Update
Planned for September	er 2021 Committee				
Commissioning	Review of plans and progress with implementation of the Council's Strategic Commissioning Approach set out in the Council Delivery Plan	Audit Commenced Target Committee date Revised Target Committee date	16.07.21 29.09.21 02.12.21	Medium (Risk to strategic plan delivery)	Work in progress. Delayed due to Service availability and Auditor absence. Report anticipated February 2022.
Children with Disabilities	To obtain assurance that care is being arranged and paid for in accordance with procedure to secure best value outcomes.	Audit Commenced Target Committee date Revised Target Committee date	30.06.21 29.09.21 02.12.21	Medium (Financial and care management risks)	Work in progress. Delayed due to Auditor absence. Report anticipated February 2022.
Financial Interfaces	To obtain assurance that appropriate checks and balances are in place to confirm the accuracy of information transferred into the financial system.	Audit Commenced Draft report issued Final draft report issued Target Committee date Revised Target Committee date	11.06.21 04.10.21 20.10.21 29.09.21 02.12.21	Medium (Key systems / processes)	Delayed due to Service and Auditor availability. Complete.

SUBJECT / SCOPE	OBJECTIVE	Progress as at	Risk / Audit	Proposal / Update
		19 November 2021	Priority	
			Level	

Planned for December 2021 Committee

Recruitment	To obtain assurance over adherence	Audit Commenced	01.07.21	Medium	This audit will now
	to the recruitment process, including	Target Committee date	02.12.21	(Key	take place in 2022.
	pre-employment checks and			systems /	This aligns with the
	document retention.			processes)	availability of
					resources within the
					audit team and within
					the services. It will
					allow for effective
					business capacity
					planning, allowing
					the People &
					Organisation and
					Customer
					Experience teams,
					who have already supported multiple
					audits over the year,
					to successfully
					undertake their
					ongoing
					improvement activity
					and support the
					current increased
					demand from the
					organisation.

Planned for December 2021 Committee (continued)

SUBJECT / SCOPE	OBJECTIVE	Progress as at		Risk / Audit	Proposal / Update
SOBSECT / SCOTE	OBSECTIVE	19 November 2021		Priority	1 Toposai / Opdate
		13 November 2021		Level	
				Level	
Attendance Management	To obtain assurance over compliance	Audit Commenced	tbc	Medium	In March 2020 all
3	with corporate policy and determine	Target Committee date	02.12.21	(Key	employee relations
	whether the Council's absence	Revised Target Committee date	30.06.22	systems /	processes were
	improvement plan is having a	3		processes)	suspended due to
	positive impact on attendance.			,	the pandemic, some
					casework was
					recommenced in
					October 2020 but a
					return to business as
					usual only
					recommenced in
					April 2021. The
					Service has
					requested that audit
					fieldwork be deferred
					until January 2022 by when there should
					be a period of
					greater normalisation
					from which to
					assess.
					400000.
					Report anticipated
					June 2022.

Planned for December 2021 Committee (continued)

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021		Risk / Audit Priority Level	Proposal / Update
Revenue Budget Monitoring	To ensure that robust procedures are in place for monitoring the revenue budget.	Audit Commenced Target Committee date	03.09.21 02.12.21	Medium (Key systems / processes)	Delayed due to Auditor and Service availability. Work in progress. Report anticipated February 2022.
Care Establishments	To obtain assurance over financial administration including payroll, timesheets, purchasing.	Audit Commenced Target Committee date	tbc 02.12.21	Medium (Key systems / processes)	Delayed due to Auditor availability. Report anticipated June 2022.

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021		Risk / Audit Priority Level	Proposal / Update
Planned for Februar	y 2022 Committee				
Debt recovery	To ensure that procedures for recovering debts are adequate, efficient, and consistently applied.	Audit Commenced Target Committee date	tbc 22.02.22	3	Delayed due to Auditor availability. Report anticipated June 2022.
Client Transport	To obtain assurance over procurement, provision and management of transport for educational and social care needs	Audit Commenced Target Committee date	. tbc Tbc.2022		Delayed due to Auditor availability. Procurement risks are being considered under consulting work with C&PSS (see Appendix C) Report anticipated 2022
Following the Public Pound	To obtain assurance that grant payments to external organisations during financial year 2021/22 comply with the Council's policy and procedure, including the Following the Public Pound code of practice.	Audit Commenced Target Committee date	tbc 22.02.22	High (Discretionary, Key systems / processes)	Delayed due to Auditor availability. Report anticipated June 2022.

SUBJECT / SCOPE	OBJECTIVE	Progress as at	Risk / Audit	Proposal / Update
		19 November 2021	Priority	
			Level	

Planned for February 2022 Committee (continued)

Land and Property To review systems and procedures in place for ensuring that the Council has surety over the Land and Buildings it owns, including title.	Audit Commenced Target Committee date	tbc Tbc.2022	Low (Compliance risks)	Report anticipated 2022
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SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021		Risk / Audit Priority Level	Proposal / Update
Planned for June 202	2 Committee				
Payroll and HR system amendments	To obtain assurance over the accuracy and completeness of the payroll as a result of changes to the workforce.	Audit Commenced Target Committee date	tbc 30.06.22	Medium (Key systems / processes)	Report anticipated June 2022.
Staff resourcing	To obtain assurance over adherence to procedures for internal movement of staff, use of relief pool staff, and agency worker engagement procedures.	Audit Commenced Target Committee date	tbc 30.06.22	Medium (Key systems / processes, new system)	Report anticipated June 2022.
Private Sector Housing	To ensure that adequate control is being exercised over income and expenditure.	Audit Commenced Target Committee date	tbc Tbc.2022	Low (Financial risks)	Delayed due to Auditor availability. Report anticipated 2022
Financial Administration - Waste	To obtain assurance over financial administration including payroll, timesheets, and purchasing.	Audit Commenced Target Committee date	tbc Tbc.2022	Low (Financial / compliance risks)	Delayed due to Auditor availability. Report anticipated 2022

SUBJECT / SCOPE	OBJECTIVE	Progress as at	Risk / Audit	Proposal / Update
		19 November 2021	Priority	
			Level	

Planned for June 2022 Committee (continued)

Planning and Building Standards fee income	To provide assurance that there are adequate systems in place to control fee income and that they are being complied with.	Audit Commenced Target Committee date	24.08.21 30.06.22	Medium (Financial risks, complexity)	Work in progress. Report anticipated June 2022.
Care Management Recording and Transactions	To obtain assurance over coordination, recording and payment for care services.	Audit Commenced Target Committee date	30.06.22	Medium (Key systems / processes,	Report anticipated June 2022.

SUBJECT / SCOPE	OBJECTIVE	Progress as at	Risk / Audit	Proposal / Update
		19 November 2021	Priority	
			Level	

Other Committees

Transformational Programme (IJB Risk Audit & Performance Committee)	To provide assurance that the IJB is continuing to make progress with delivery of its transformation agenda.	Audit Commenced Target Committee date (IJB RAPC)	tbc February 2022	High (Key programme, main IJB audit)	In line with previous agreement between Aberdeen City Council and the IJB, the report will be presented to the next available Audit Risk & Scrutiny Committee following presentation to the IJB RAPC.
Pensions System (Pensions Committee)	To consider whether appropriate control is being exercised over the system used to administer the Fund, including access, contingency planning and disaster recovery, data input, and that interfaces to and from other systems are accurate and properly controlled.	Audit Commenced Target Committee date (Pensions)	tbc February 2022	High (Key system, main Pensions audit)	Pension fund reports are not separately reported to Audit Risk & Scrutiny.

APPENDIX C 2021/22 INTERNAL AUDIT CONSULTANCY WORK

SUBJECT / SCOPE	OBJECTIVE	Progress as at 19 November 2021
Compliance with Procurement Regulations	To support the Commercial and Procurement Shared Service in developing its controls and approach to improving compliance with procurement requirements.	Feedback has been provided to the Commercial and Procurement Shared Service on planned changes to improving compliance. Regular reports are being provided by C&PSS to the Risk Board.
Cyber Security	To support the Digital and Technology Service in obtaining assurance and further developing controls over the Council's Cyber Security arrangements.	Discussions have commenced with the new CO - Digital and Technology with a view to identifying areas where Internal Audit input might add value.
Social Care System controls and readiness for deployment	To support the Digital and Technology Service in its development of controls in respect of the new social care system.	Engagement with Digital and Technology and key service officers highlighted the key controls anticipated within the new system to ensure these are being considered at appropriate stages of system development.