

Resources Directorate Internal Audit Section



Internal Audit Progress Report

(as at 31 December 2022)

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Internal Audit Progress Report

1 Introduction

1.1 Background

The Internal Audit Progress Report sets out performance in relation to the Internal Audit Plan. It summarises the work performed, the priority recommendations raised, the critical findings, emerging trends, and relevant value for money findings.

This progress report covers the period from 1 April – 31 December 2022, and follows the updates provided in the last Committee meeting held on 29 November 2022. This report is structured to provide a summary account of audit activities, outcomes and progress made against the Audit Plan 2022/23.

The Audit Plan 2022/23 was approved by the Governance and Audit Committee on 15 March 2022. The Internal Audit Plan provides the framework for audit work each year and is aligned to the Council's corporate governance arrangements, whilst also being responsive to any changes to the risks faced by the Council during the year.

1.2 Independence and objectivity

The Internal Audit section reports to the Audit Manager. In line with the provisions of the Public Sector Internal Audit Standards (1100), organisational independence is maintained, as the Audit Manager is not responsible for managing any functions beyond the Internal Audit and Investigation teams. The Audit Manager reports administratively to the Head of Finance and functionally to the Governance and Audit Committee for audit-related matters. There have been no impairments of independence or objectivity.

1.3 Continuing Professional Development

Auditors have completed their year-end personal reviews and formalised their objectives for 2022/23. Prior to discussing performance, auditors updated their skills assessment in application of the IIA Professional Competencies Framework.

The results of personal reviews and skills assessments informed the year-end Audit Manager's review against the Quality Assurance and Improvement Programme (Standard 1300), from

which a generally strong baseline of knowledge and skills were recognised across the audit team.

1.4 External Peer Assessment

The Public Sector Internal Audit Standards (PSIAS) requires an external assessment of conformance with the Standards to be conducted at least once every five years by a qualified, independent assessor or assessment team from outside the organisation. The latest external peer assessment was completed by the Head of Audit from Rhondda Cynon Taf and reported to the Governance and Audit Committee in March 2018.

Further to the details provided to Committee in July and November 2022, the assessment is being completed by the Chief Auditor in Monmouthshire / Newport who has been allocated to undertake the peer assessment of Cardiff Council's Internal Audit service.

It is intended for the assessment to be presented to the Governance and Audit Committee in its March 2023 meeting.

2 Summary of Work Performed

2.1 Current Activities

During quarter three 2022/23, the priorities and approach of the audit team were to deliver a combination of management support through consultation and engagement in high-risk areas, and to further progress the delivery of assurance engagements from the Audit Plan.

The Internal Audit Team has continued to be available and to provide advice and guidance on the design and implementation of effective controls in the administration of Welsh Government COVID-19 grants schemes as well as for the Homes for Ukraine Scheme, to achieve compliance and control, and arrangements for the effective prevention and detection of fraud.

Work continues to be undertaken predominantly on a desktop basis, although site visits are taking place for establishment audits, and where there is a need to observe the operation of physical controls or operating practices.

The table below shows a list of audits and their reporting status in the current year until 31 December 2022, whereby 30 new audit engagements were completed to at least draft output stage and 19 audit engagements from the prior year have been finalised. A summary of the audit outputs and opinions in the year to date is shown below.

Figure 1. Audit outputs and opinions (at 31 December 2022)

			Opinion				
Status	Number of completed audits	Effective	Effective with opportunity for improvement	Insufficient with major improvement needed	Unsatisfactory	No opinion given	
Draft	12	3	8	1	0	0	
Final	37	5	20	5	0	7	
TOTAL	49	8	28	6	0	7	
	30	New Audit Engagements completed					
	19	Finalised Audit Engagements from 2021/22					

Figure 2. 2022/23 Audit outputs and opinions (at 31 December 2022)

No.	Assurance Audit Engagement	Audit Opinion
1.	Welsh Government Covid Grants - Assurance (2021/22)*	Effective
2.	Get me home service	
3.	ICF schemes (incl. Families First)	
4.	School Asset Management - Thematic (Albany)	
5.	Housing Benefit / Local Housing Allowance / Council Tax Reduction Scheme	
6.	Income and Debtors	Effective with
7.	Health and safety	opportunity for
8.	Leisure Contract Governance	improvement
9.	Shared Regulatory Services in Cardiff	
10.	Cantonian	
11.	Schools with Surplus Balances - Thematic	
12.	Agency Staff Payments	
13.	Risk Management Arrangements	
14.	Procurement	
15.	Brindley Road Stores	
16.	Safeguarding	
17.	Cardiff Caravan Park	

No.	Assurance Audit Engagement	Audit Opinion
18.	Cardiff Riding School	
19.	Cardiff Organic Waste Treatment Contract	
20.	Glyncoed Primary School	
21.	Catering in Opted out schools	
22.	Cardiff Dogs Home	
23.	Contract Variations	Insufficient, major improvement needed
	Audit Work with 'No Opinion'	
24.	CRSA - Purchases and Payments	
25	CRSA - Payroll and HR	
26.	Joint Committees - Prosiect Gwyrdd	Consultancy, and
27.	Joint Committees - Port Health Authority	certification, advice
28.	Joint Committees - Glamorgan Archives	guidance
29.	Service / Process Consultancy	
30.	Education Improvement Grant 2021/22	
	Concluded Audits from the Prior Year	
31.	Purchasing and Payments - in year testing	Effective
32.	Commissioning and Procurement - People and Communities	
33.	Main Accounting	
34.	Cradle to grave audit	Effective with
35.	Telecare	opportunity for
36.	Information Governance	improvement
37.	Business Continuity and Incident Management	
38.	Performance management	
39.	Purchasing cards	
40.	Directorate Recovery Planning	
41.	Resources - Pre-Contract Assurance	
42.	Income and debtors - Social Services	
43.	School Health and Safety – Thematic	
44.	Value for money in Digital Initiatives	
45.	Children's Placements	Insufficient, major
46.	Section 106 agreements	Improvement needed
47.	Mileage & Subsistence	

No.	Assurance Audit Engagement	Audit Opinion
48.	Cloud Computing	
49.	Pre-contract assurance - Children's Services	

*Arrangements were made for the audit of 'Welsh Government Covid Grants – Assurance' to be overseen by another Operational Manager within Accountancy, and to remove any involvement in the audit review from the Audit Manager, who has advised on the design and operation of controls in the administration of these grants.

Further to the table above, the outputs that were not been given an assurance opinion and the reasons for this were as follows:

Figure 3. Completed audits without an assurance opinion (at 31 December 2022)

Audit	Comments	
Joint Committees - Prosiect Gwyrdd		
Joint Committees - Port Health Authority	Work to support completion of Statement of Accounts, 2021/22	
Joint Committees - Glamorgan Archives		
Service and Process Consultancy –Homes for Ukraine Scheme and Welsh Government COVID-19 Grants.	Compliance, control, and counter-fraud guidance	
Education Improvement Grant 2021/22	Grant certification	
CRSA - Purchases and Payments	Control Risk Self-Assessment completion	
CRSA - Payroll and HR	exercises with clients	

The report status for the year to date is shown in **Appendix A**.

2.2 Resources

A new Principal Auditor post has been widely advertised with a closing date of 16 January 2023. This is in accordance with the audit team structure update provided to the Governance and Audit Committee on 29 November, whereby Members were advised of the decision to invest in an additional Principal Auditor post, to enhance a solid core of senior officers within the team and to not fill vacant posts at lower grades.

Since the last Committee update, a flexible retirement request has been approved for the Group Auditor through which their hours will reduce by 10 hours per week (from 37 to 27) from 1 April 2023. Information on this, and minor adjustments in the working hours of other members of the audit team relating to the financial year 2023/2024 are contained in agenda item 8.2 – Internal Audit Charter and Audit Plan 2023/24.

Committee has been advised of the impact of vacant posts on the progression of the audit plan in the year to date and, to support audit coverage in areas of IT and corporate governance this year, a contract has been awarded for the delivery of four audit engagements under the direction of the Audit Manager. At the time of reporting, the two IT audits are in a position of active fieldwork. There have also been some instances of sickness which have had an impact on the available staff resources during quarter three.

As all operational auditors and the audit assistant record all actual time worked, there is useful management information available for planning, monitoring, and reporting purposes. Timesheet data contained 891 chargeable days up to the end of quarter three, against a pro-rata plan of 1078 days. The lower number of chargeable days to planned are primarily attributed to the vacant senior auditor post, but also impacted by greater use of administrative and management time, and staff engagement in development and corporate wellbeing initiatives. There have been some instances of short-term sickness, although the impact of this on staff resources has been relatively minor.

Time is available for audit development purposes, and one Auditor has funding in place to study the Certified Information Systems Auditor (CISA) Qualification with ISACA.

2.3 Annual plan

The Audit Plan 2022/2023 is contained within Appendix B. Whilst set on an annual basis, the Audit Plan is adaptable and responsive and will be subject to ongoing risk assessment, prioritisation, and review throughout the year to maximise assurance and management support. In-year changes may be introduced where appropriate, to respond to emerging risks and issues as the year progresses.

For the information of the Committee, all audits that were at draft status at the end of 2022/2023 are highlighted in 'grey' in order to enable the finalisation of these audits to be tracked, whilst

providing a visible separation from the audit engagements contained within the Audit Plan 2022/2023.

Delivery of the Audit Plan 2022/2023 has been significantly lower than targeted in quarter three. This is attributed in part to a reduced level of staff resources as outlined in section 2.2. 'Resources', and to some isolated delays in receiving the information requested in order to conclude audit fieldwork. The quarter three position in delivering the Audit Plan is shown is section 3.2 'performance'.

The Audit Plan has been reviewed and the Audit Manager has identified forty remaining audits in scope to be worked upon before the financial year end. The audits are targeted to provide a sufficient spread of assurance, that mitigates any impairment to the annual opinion of the Audit Manager on the Council's control environment for 2022/2023. These have been grouped into priority 1 audits (25 audits) and priority 2 audits (15 audits) and are contained within the tables below.

- Priority 1 audits are all to be targeted to for issue to draft report stage by the end of the
 financial year. Delivering these audits would ensure all fundamental areas of the plan are
 delivered, that core areas of corporate governance have been reviewed, and that there is
 sufficient coverage at the directorate level. Delivering these audits would achieve 52% of
 the Audit Plan against a target of 70%.
- **Priority 2 audits**, which include the thematic audit of performance management across each directorate, and wider directorate-level audits, are to commence when the allocated auditor has delivered their priority 1 audits.
- It is intended to conclude any priority audits which have not been completed by the financial year-end in quarter one 2023/2024, for which a provision will be made in the Audit Plan 2023/2024 with a request for Committee approval on 21 March 2023.

Alongside this targeted approach, there will be a need to ramping audit delivery during quarter four, to be managed through monitoring and review arrangements, and assisted in part by the four audits being delivered under contract within this timescale.

Figure 4. Priority 1 Audits

Status (as at 31.12.2022)	Assignment
Report Writing /	Waste Management Enforcement
Review	City Deal 2021/22
Audit Fieldwork	ICT Audit - Cyber Security Governance
	Directorate PCI - DSS Compliance
	Central Transport Service
	Norwegian Church Preservation Trust 2021/22
	Disposal of Land and Buildings
Commencing	Council Tax
Fieldwork	Pensions and Investments
	Cardiff Further Education Trust Fund 2021/22
Planning	Ethics and Values
	Partnership / Arms-length Assurance
	In-year testing - Purchases and Payments
	In-year testing - Payroll and HR
	Complaints and Compliments
	Alarm Receiving Centre
	Performance Management – Economic Development
	Eastern High
	FOLLOW UP - Cardiff West Community High School
	International White Water
Not yet started	Harbour Authority
	Health and Safety – Education & LL
	National Fraud Initiative
	Fitzalan High School
	Baden Powell Primary school

Figure 5. Priority 2 Audits

Status (as at 31.12.2022)	Assignment
Planning	Performance Management - Adults, Housing & Communities
	Performance Management - Education and Lifelong Learning
	Performance Management - People and Communities
	Performance Management - Childrens Services
	Performance Management - Resources
	Performance Management - PTE
	Performance Management - Governance and Legal Services
	Youth Offending Service
	Commercial Waste
Not yet started	Skip Hire
	Emergency Duty Team
	Home Care
	Community Safety
	Delegation and decision making
	Residential Care

2.4 Critical findings or emerging trends (Q3 2022/2023)

During quarter three, one draft report has been issued with an opinion of 'insufficient with major improvement needed'. The audit, of contact variations, relating to formal changes to a contract relating to price, volume, costs, the term etc. has been issued in draft. Management consideration and discussion will follow before the report is finalised, at which time the assurance rating and recommendations will be confirmed.

Sample-based testing did not identify instances where contract variations had not been appropriately approved, but it was considered that systems were not being utilised effectively in order to have a complete central record of contract variations. Variation information was being recorded on the Council's electronic procurement systems and Contracts Register (Proactis) and not being integrated with the financial ledger (SAP), representing a risk to the completeness and accuracy of variation order information held. In the absence of a complete central record, it is

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not possible to provide the necessary assurance that variations are being appropriately reported and consistently approved in accordance with corporate requirements.

Further legislative requirements are coming into force that the organisation needs to begin to prepare for. The Procurement Bill is due to come into force in the next 12-18 months which aims to improve transparency on public procurements and requires greater reporting on public procurements across the board, including contract variations. The audit has advocated that a project-based approach is used to review, and update where required, current systems and processes, and to ensure all responsibilities are clearly defined and understood across the Council aligned to the requirements of the Bill In making any system updates there is an opportunity to make the best use of technology and automation. Further to this a system of training and guidance on systems and responsibilities has been recommended.

2.5 Value for Money findings (Q3 2022/2023)

There were no value for money themed audits undertaken within the reporting period.

The vast majority of audits undertaken by the Internal Audit Team have objectives which cover value for money assurances, from which a general satisfactory level of assurance can be provided for the reporting period. However, within the audits of a lower assurance opinion, there were control gaps which need to be addressed to provide assurance that the objectives of these services are being run with proper attention to a combination of economy, efficiency, and effectiveness.

3 Audit Performance and Added Value

3.1 Added value

Relationship Manager meetings were held with Directors and their representatives during the development of the audit plan in quarter four 2021/2022. Further meetings were then held quarterly during 2022/2023, with particular focus given to understanding the priorities and risks within each management team, and the changes to systems or processes planned or underway, in order to direct audit advice and inform the planning of audit engagements.

Feedback from audit clients has been positive in the year to date, with satisfaction rates at 100% from clients who have responded, 88% of whom advised that their audit 'added value'

In the audit outputs issued to date (as at 31 December 2022), there have been 237 recommendations made, of which 96 have been agreed, and 141 are presently being considered by audit clients through draft audit outputs. These are summarised below:

Figure 6. Recommendations raised and agreed

Rating	Recommendations	Recommendations	Recommendations
3	made	agreed	being considered
Red	1	0	1
Red / amber	77	41	36
Amber / green	155	53	102
Green	4	2	2
TOTAL	237	96	141

One recommendation relating to a contract management review reported in 2021/2022 has recently not been accepted. The amber / green recommendation was for steps to be taken to check professional indemnity insurance is in place for those instructed for legal practice (namely solicitors and barriers) on a particular framework. In order to be part of the Framework, appropriate arrangements for professional indemnity insurance have to be in place and on that basis, management consider that it isn't necessary to check those provisions when work is outsourced under the Framework.

3.2 Performance

As outlined in section 2.1 ('Current Activities'), the priorities and approach of the audit team were to deliver a combination of management support through consultation and engagement in high-risk areas, and to further progress the delivery of assurance engagements from the Audit Plan.

The primary reasons why the audit service is operating at a lower capacity are outlined in 2.2 ('Resources'). At the outset of the year, a proposed target for delivery of the Audit Plan was set at 70% and integrated into audit planning and performance management processes. The target was considered to be stretching and achievable, for which the primary reason for slippage against this measure relates to the ongoing vacancy for which a recruitment exercise in underway, as referred to in section 2.2 ('Resources'). Steps have been taken to prioritise the audits for delivery

during quarter 4, and a ramping up of delivery, for which details are provided in section 2.3 ('Annual Plan').

A number of audits have been finalised from last financial year, as shown in figure 1 and 2, but the majority of the new audits completed this year are at draft stage. Once reports have been considered and responded to by management the number of finalised audits will increase, as will the measure of finalised audits per full time equivalent. Attention is being given to engaging managers with a view to concluding draft audits.

The percentage of draft reports completed in four weeks has been improving each quarter and recovering from quarter one performance. The importance of prompt audit reporting will be a continued focus this year.

Governance and Audit Committee Members have taken particular interest in performance against the percentage of audit recommendations implemented within the agreed timescale, which has been below target for a number of years. After an improvement in performance against this measure in quarter two, which allows for slippage of two working weeks from the target set for actions to be evidenced as complete, performance has fallen slightly. The Audit Manager attended Senior Management Team on 10 January 2023 to present and discuss the position in responding to recommendations on a timely basis and emphasise the importance of maintaining good and clear communication as recommendations are progressed, and in the event of any difficulties or changing circumstances.

Figure 7. Performance against targets for 2022/2023 (to date)

Performance Indicator	2021/22	2022/23	Q1	Q2	Q3
renormance malcator	Outcome	Target	Outcome	Outcome	Outcome
The percentage of the Audit Plan completed	61%	70%	13%	25%	29%
The average number of audit productive days per FTE	147	150	37	68	103
The average number of finalised audits per FTE	7.4	9	1.43	3.13	4.82
The percentage of draft audit outputs delivered within four weeks	92%	90%	80%	84%	87%

Performance Indicator	2021/22	2022/23	Q1	Q2	Q3
Performance mulcator	Outcome	Target	Outcome	Outcome	Outcome
The percentage of audit recommendations implemented within the agreed timescale	68%	80%	56%	71%	65%

3.3 Audit Plan Delivery

In addition to monitoring and managing the numbers of audits delivered, audit engagements are allocated in order to ensure that there is a breadth of assurance by the financial year-end, upon which to provide a complete Audit Manager annual opinion.

As outlined in section 2.4 – Current Activities, there have been thirty new audit engagements completed in the financial year 2022/2023 to date. The current position for the full Audit Plan 2022/2023 is shown in **Appendix B** – Audit Plan.

3.4 Recommendations

A summary of the open audit actions is included within **Appendix C**, to support the Governance and Audit Committee to monitor and review the management response to recommendations.

Included within **Appendix D** are the red and red/amber open recommendations including the current management response for the information and monitoring of the Committee. **Appendix E** contains the red and red/amber recommendations, which have been completed since the last Committee meeting. Amber / green and green recommendations are provided to Committee via a separate route.

The table below shows the instances where implementation dates have been revised typically by audit clients, for audits which are not recognised as fully addressed by management (as at 31.12.2022). The position against recommendations is reported, to monitor progress and target discussions on the effective management of risk, in relationship management meetings each quarter.

Figure 8. Revised recommendation implementation dates and status

Directorate / Audit Category	Number of recommendations with revised dates
Fundamental	22
Corporate	24
External and grants	13
Adults, Housing and Communities	40
Children' Services	29
Economic Development	39
Education and Lifelong Learning	86
Planning Transport and Environment	45
People and Communities	1
Resources	57
Governance and Legal Services	8
Waste Management	81
	445
Schools	187
TOTAL	632

Actions now implemented	Actions still open
20	2
18	6
9	4
25	15
23	6
30	9
59	27
33	12
1	0
44	13
8	0
78	3
348	97
133	54
481	151

<u>NB</u> - It should be noted that the table above represents the position as at 31 December 2022, whereas the recommendation tracker appendices show the detailed position against each recommendation at the closest possible date to each Committee meeting.

4 Conclusion

4.1 Summary

During quarter three 2022/2023, the priorities and approach of the audit team have continued to be the delivery of a combination of management support through consultation and engagement in high-risk areas, and delivery of assurance engagements from the Audit Plan.

A new Principal Auditor post has been widely advertised with a closing date of 16 January 2023. This is in accordance with the audit team structure update provided to the Governance and Audit Committee on 29 November, whereby Members were advised of the decision to invest in an additional principal auditor post, to enhance a solid core of senior officers within the team and to not fill vacant posts at lower grades.

Delivery of the Audit Plan 2022/2023 has been significantly lower than targeted in quarter three. This is attributed in part to a reduced level of staff resources as outlined in section 2.2. 'Resources', and to some isolated delays in receiving the information requested in order to

conclude audit fieldwork. The quarter three position in delivering the Audit Plan is shown is section 3.2 'performance'.

The Audit Plan has been reviewed and the Audit Manager has identified forty remaining audits in scope to be worked upon before the financial year end. The audits are targeted to provide a sufficient spread of assurance, that mitigates any impairment to the annual opinion of the Audit Manager on the Council's control environment for 2022/2023.

Delivering the prioritised audits would ensure all fundamental areas of the plan are delivered, that core areas of corporate governance have been reviewed, and that there is sufficient coverage at the directorate level.

Alongside this targeted approach, there will be a need to ramping audit delivery during quarter four, to be managed through monitoring and review arrangements, and assisted in part by the four audits being delivered under contract within this timescale.
