

Internal Audit Progress Report 20 February 2024

Elizabeth Goodwin, Chief Internal Auditor



1. Introduction

Internal Audit is a statutory function for all local authorities. The Isle of Wight Council's Internal Audit service has an in-house team and a shared Chief Internal Auditor with Portsmouth City Council (PCC). The in-house audit team is supported by audit and counter fraud staff from PCC under a collaborative working arrangement.

The requirement for an Internal Audit function in local government is detailed within the Accounts and Audit Regulations 2015 as to:

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].

2. Purpose of report

The purpose of this report is to update the Audit and Governance Committee on the progress of the 2023/24 Audit Plan as of 20 February 2024 and to highlight any significant risk exposure and control issues, including fraud and governance risks.



3. Assurance Levels

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 for the area under review.

Assurance Level	Description / Examples
Assurance	No issues or minor improvements noted within the audit but based on the testing conducted, assurance can be placed that the activity is of low risk to the Authority
Reasonable Assurance	Control weaknesses or risks were identified but overall the activities do not pose significant risks to the Authority
Limited Assurance	Control weaknesses or risks were identified which pose a more significant risk to the Authority
No Assurance	Major individual issues identified or collectively a number of issues raised which could significantly impact the overall objectives of the activity that was subject to the Audit

Audits rated No Assurance are reported in their entirety to Audit and Governance Committee along with Director's comments



4. Exception Risk Ranking

The following table outline the exceptions raised in audit reports, reported in priority order and are broadly equivalent to those previously used.

Priority Level	Description
Low Risk (Improvement)	Very low risk exceptions or recommendations that are classed as improvements that are intended to help the service fine tune its control framework or improve service effectiveness and efficiency. An example of an improvement recommendation would be making changes to a filing system to improve the quality of the management trail.
Medium Risk	These are control weaknesses that may expose the system function or process to a key risk but the likelihood of the risk occurring is low.
High Risk	Action needs to be taken to address significant control weaknesses but over a reasonable timeframe rather than immediately. These issues are not 'show stopping' but are still important to ensure that controls can be relied upon for the effective performance of the service or function. If not addressed, they can, over time, become critical. An example of an important exception would be the introduction of controls to detect and prevent fraud.
Critical Risk	Control weakness that could have a significant impact upon not only the system function or process objectives but also the achievement of the Council's objectives in relation to: The efficient and effective use of resources, The safeguarding of assets, The preparation of reliable financial and operational information, Compliance with laws and regulations and corrective action needs to be taken immediately.

Any critical exceptions found will be reported in their entirety to the Audit and Governance Committee along with Director's comments



5. Follow-up Action Categorisation

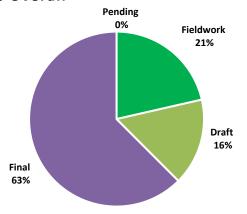
The following table outlines the follow up categories used to describe the outcome of follow up testing completed.

Follow Up Categories	Description
Open	No action has been taken on agreed action.
Pending	Actions cannot be taken at the current time but steps have been taken to prepare.
In Progress	Progress has been made on the agreed action however they have not been completed.
Implemented but not Effective	Agreed action implemented but not effective in mitigating the risk.
Closed: Verified	Agreed action implemented and risk mitigated, verified by follow up testing.
Closed: Not Verified	Client has stated action has been completed but unable to verify via testing.
Closed: Management Accepts Risk	Management have accepted the risk highlighted from the exception.
Closed: No Longer Applicable	Risk exposure no longer applicable.



6. Audit Plan Progress

Status Overall



Status (including follow-ups)	Audits
Pending	0
Fieldwork	12
Draft	9
Final	35
TOTAL	56

There were 57 reviews set out in the Audit Plan for 2023/24. There have been a number of changes to the originally proposed plan, primarily related to additional grants requiring certification by Internal Audit and consequent reductions in planned audit activity elsewhere. The current number of planned audits (full, follow-up and grant certification) is 53, more detail is provided in section eight of this report.

In addition to core assurance Internal Audit is providing further, ongoing support to the Council, by utilising IDEA software to highlight potential duplicate invoices.

All reviews currently included in the 2023/24 programme of work are included in summary information on this page. Detail regarding changes to the Audit Plan (not previously reported) is provided in the 'Audit Status' section, later in this report.

This level of coverage represents an increase from the coverage provided prior to the partnership with Portsmouth City Council (PCC) and is appropriate for the size and range of responsibilities held by the Isle of Wight Council.



Audits in Period

Reliability and Integrity of Data

Summaries for reports rated 'reasonable assurance' or better are provided below.

Disabled Facilities, Process Review						
Exceptions R	aised	Overall Assurance Level				
Critical	High	Medium	Low	Reasonable Assurance		
0	1	1	0			
Assurance Level by Scope Area						
Achievement of strategic objectives NAT						
Compliance with Policies, Laws & Regulations			Reasonable Assurance			
Safeguarding of Assets			Reasonable Assurance			
Effectiveness and Efficiency of Operations			NAT			

The high-risk finding raised relates to gaps in financial oversight of Disabled Facilities Grant (DFG) spend, including approval and overall oversight of the budget. For context there is in excess of a £2m underspend on the Island for the DFG. A strategy should be considered, to address this underspend and ensure the grant is fully utilised for the benefit of the community, whilst complying with the grant conditions.

More minor issues were identified, regarding the need to review/update the Council's associated policy and procedure documents, ensuring that compliance with procurement rules is evidenced and that appropriate information is available on the Council's website.

Venture Quays Exceptions Raised Overall Assurance Level Critical Medium High Low **Reasonable Assurance** 0 0 10 0 **Assurance Level by Scope Area** Achievement of strategic objectives **Reasonable Assurance** Compliance with Policies, Laws & Regulations Safeguarding of Assets **Effectiveness and Efficiency of Operations** Reasonable Assurance Reliability and Integrity of Data

This audit covered two projects focussed on East Cowes, a range of initiatives managed as a single regeneration project and the project to bring forward housing on sites purchased from Homes England. Both projects have been impacted on the dissolution of the Regeneration Directorate, with changes in senior staff responsible. To a degree both projects need to be 'normalised', for example updating risk registers and implementing revised governance arrangements. Specific to regeneration there are also actions to be addressed stemming from the recent review by the Levelling Up Fund (LUF). Regarding the housing side, following a failed procurement exercise, Housing Member Board (HMB) has recently approved disposal of the sites.



IT Disaster Recovery							
Exceptions Raised				Overall Assurance Level			
Critical	High	Medium	Low	Reasonable Assurance			
0	0	4	0				
Assurance Level by Scope Area							
Achievement of strategic objectives							
Compliance	with Policies	NAT					
Safeguarding	g of Assets	Reasonable Assurance					
Effectiveness	and Efficier	Reasonable Assurance					
Reliability an	d Integrity c	NAT					

Medium risk findings were raised regarding IT elements covered in this review, regarding finalising the revised IT Disaster Recovery Plan and commissioning of the St Mary's site (with failover testing to follow). In relation to service responsibilities a single finding covered the need to enhance IT elements of service Business Continuity plans and share learning from future exercises across the Council.

Overall Assurance Level
Reasonable Assurance

Achievement of strategic objectives	NAT
Compliance with Policies, Laws & Regulations	Reasonable Assurance
Safeguarding of Assets	Reasonable Assurance
Effectiveness and Efficiency of Operations	NAT
Reliability and Integrity of Data	NAT

Sample testing of overtime and leavers (sample of ten for each) identified two errors. Regarding overtime, one claim which hadn't been approved by the appropriate party and for leavers one instance of an underpayment to a leaver. The need for overtime claims to be approved by a separate individual has been re-highlighted to staff and the incorrect payment to the leaver has now been corrected.



Accounts Payable							
Exceptions Raised					Overall Assurance Level		
Critical	High	Medium	Low		Reasonable Assurance		
0	1	0	2				
Assurance Level by Scope Area Achievement of strategic objectives NAT							
Compliance with Policies, Laws & Regulations					Assurance		
Safeguarding of Assets					Limited Assurance		
Effectiveness	and Efficie		NAT				
Reliability and Integrity of Data					NAT		

The high risk finding related to either insufficient checks being made or anomalies in evidence recorded, prior to the vendor details being changed in all ten instances checked by Internal Audit. The process needs to be reviewed end to end, with robust checks made and appropriate evidence retained, prior to vendor details being updated. Low risk findings raised relate to late payments in three out of 25 invoices reviewed by Internal Audit and one sample vendor being identified.



Follow-up Audits in Period

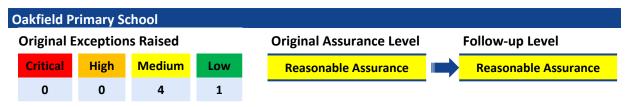
Summaries for follow-up reports rated 'reasonable assurance' or better are provided below.

St Mary's (Catholic	Primary Sch	nool		
Original E	xception	ns Raised		First Follow-up Level	Second Follow-up Level
Critical	High	Medium	Low	Limited Assurance	Reasonable Assurance
0	3	4	1		

Assurance level remains as reasonable, due to further work being required to fully address one of the high risk findings summarised below.

1	Medium	Inventory Processes have been improved, with annual checks and better management of disposals implemented.	Closed: Verified
2	Low	Minibus Minibus no longer in place.	Closed: No Longer Applicable
3	Medium	Business Continuity Planning Revised Business Continuity Plan has been produced, with a specific appendix covering cyber security.	Closed: Verified
4	High	Data Security The server is now in a locked cabinet.	Closed: Verified
5	Medium	Estate Management A revised fire risk assessment is in place and revised processes, to ensure that required site management tasks are carried out as required.	Closed: Verified
6	High	Income Overall income records have improved. However, enhancements regarding letting records are in progress.	In Progress
7	High	Expenditure Appropriate records are now maintained for expenditure.	Closed: Verified
8	Medium	Single Central Record – SCR Appropriate processing notes and records for starters and leavers are now in place.	Closed: Verified





Good progress has been made, with the majority of issues originally identified satisfactorily addressed.

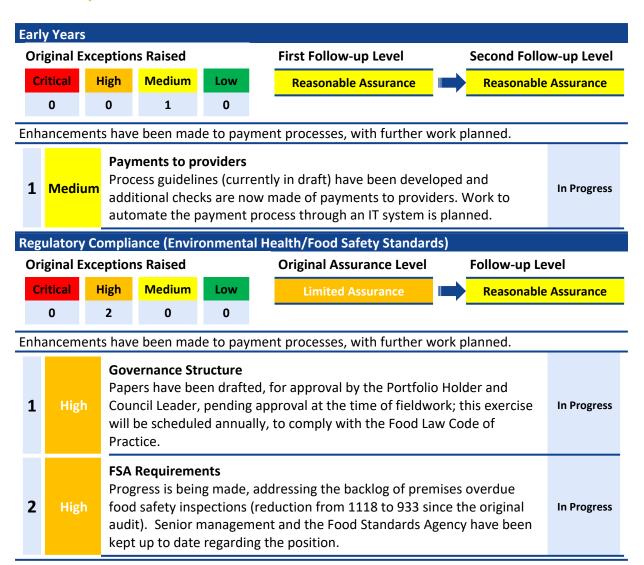
1	Low	Establishment of an accountable governing body The scheme of delegation has been updated and is on the school website.	Closed: Verified					
2	Medium	Inventory The Inventory has been enhanced, to include purchase prices, values and disposal information. Monthly checks are carried out, to ensure this remains accurate.	Closed: Verified					
3	Medium	Income Processes regarding cash payments have been improved. Minor discrepancies were identified in sample testing. A new action has been agreed, to address this though an enhanced reconciliation process.	In Progress					
4	Medium	Lettings Clear and consistent processes are now in place, with well maintained records.	Closed: Verified					
5	Medium	Expenditure A new process has been implemented, with purchase requests required from staff. Further enhancements have been agreed, to ensure these can be reconciled to invoices, where these relate to multiple suppliers.	In Progress					
Risk Management								
_	Original Supervisions Bailed Start Fallers and Lovel Second Fallers and Lovel							

Risk Management											
Original Exceptions Raised				First Follow-up Level		Second Follow-up Level					
Critical	High	Medium	Low	Assurance		Reasonable Assurance					
0	1	2	0								

As noted below there has been a deterioration in the timeliness/corporate visibility of risk reporting for two directorates within the Council.

1	Medium	Consistency of Risk Management Issues were identified regarding the timeliness/corporate visibility of risk reporting regarding Children's Services and Public Health; this represents a deterioration since the initial follow-up for this area.		
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Council Tax and NNDR													
Original Exceptions Raised							Original Assurance Level	vel					
Cı	ritical	Н	ligh	Medium	Low		Reasonable Assurance	Reasonable Reasonable					
	0		2	2	0								
Prog	gress is	on	going,	, towards a	ddressin	ng iss	sues identified.						
1	High	n	Proc reco		nd temp	olate	e letters have been enhance d satisfactory progress is be			Closed, verified			
2	High	1	Write Offs A Service Plan provided to Internal Audit identifies that enhancements are planned regarding the approach taken to write-offs.										
3	Mediu	Long Term Debt Recovery The Service Plan identified directly above also covers enhancing debt recovery, with work in progress. The number of accounts with long term debt has reduced by 10% for Council Tax and 14% for NNDR, although the total value of long term debts has increased.											
4	Mediu	Monitoring of Discounts, Exemptions and Disregards The Service Plan provided to Internal Audit identifies that work to enhance this area is pending. A number of improvements are planned, for example annual reviews to support identifying and investigating trends. In Progress											
Acc	ounts F	Rece	eivabl	e (AR)									
Ori	iginal E	хсе	ption	s Raised			Original Assurance Level		Follow-up Le	vel			
Cı	ritical	Н	ligh	Medium	Low		Reasonable Assurance		Reasonable	Assurance			
	0		1	2	0			1					
Prog	gress is	on	going,	, towards a	ddressin	ng iss	sues identified.						
1	Wightcare Debt Recovery The overall level of debt has reduced from £93,226 at the time of the original audit to £79,083 at the point of follow-up. Work is ongoing to embed a more robust approach to managing debts.									In Progress			
2	Mediu	ım	Authority Debt Recovery The issue with accounts being locked (preventing the issuing of debt										
3	Mediu	ım	A mo		approacl		as evidenced at follow-up, in as and the central team.	ncludi	ng better	Closed, Verified			



Software Development										
Original Exceptions Raised				Original Assurance Level Follow-up Level						
Critical	High	Medium	Low	Reasonable Assurance Reasonable Assurance						
0	0	4	0							

Good initial progress was made addressing the actions agreed. Further progress has been impacted by the Software Development Manager post falling vacant, subsequent to the original audit and the Council being unsuccessful filling this post. A second follow-up is included in the 2024/25 Audit Plan.

1	Medium	Business Justification/Benefits Realisation A draft, overarching set of standards has been developed, with implementation supported by the template documented detailed below.	In Progress
2	Medium	Governance/Communications Templates have been developed, for example regarding action/decision logs and highlight reporting. Fully implementing these templates is pending.	In Progress
5	Medium	Development, Risk Management and Testing A range of templates have been developed, covering for example risk management and testing. Fully implementing these templates is pending.	In Progress
4	Medium	System Portfolio Resilience An initial gap analysis of skills has been completed, however actions to fully address gaps, for example additional training are pending.	In Progress





Audit Status

The table below summarises audit status including detail regarding audits now scheduled, either where the area of focus had not been confirmed at the time the 2023/24 Audit Plan was produced or where changes have been made subsequently, for example to respond to service requirements, in year.

For context audits below are grouped by the directorate structure, as at the time the Audit Plan was approved by Committee. The revised structure, implemented mid-year, will be used for reporting from 2024/25.

Audit	Full	First Follow-up	Second Follow-up	Grant	Status	Assurance Level	Comments		
Adult Services									
Better Care Fund (subset)					Suspended		Replaced with additional fraud work.		
Homelessness					Fieldwork				
Adults Financial Management (Debt Recovery)					Draft				
Deferred Payments					Final	Reasonable	Reported in September.		
Children's Services	Children's Services								
Direct Contact & Supervision					Draft				
Cowes Primary School					Final	Reasonable	Reported in December.		
Holy Cross Catholic Primary School					Final	Reasonable	Reported in December.		
Island Learning Centre (Pupil Referral Unit)					Fieldwork				
Out of Area Placements (Care)					Draft				
School Financial Management Standard (SFVS)					Final	Reasonable	Reported in September.		
Children's Key Financial Controls					Draft				
Transition, Children to Adults					Fieldwork				
St Mary's School					Final	Reasonable	Included in this report.		
Oakfield School					Final	Reasonable	Included in this report.		
Brighstone School					Final	Reasonable	Reported in September.		
Early Years					Final	Reasonable	Included in this report.		



Audit	Full	First Follow-up	Second Follow-up	Grant	Status	Assurance Level	Comments
Family Hubs and Start for Life programme					Final	Assurance	Reported in December.
Troubled Families (Children's)					Fieldwork		
Corporate Services							
Accounts Payable (AP)					Final	Reasonable	Included in this report.
Bank and Cash					Draft		
Payroll					Final	Reasonable	Included in this report.
IT Disaster Recovery					Final	Reasonable	Included in this report.
Strategic Review of Fleet					Final	Reasonable	Reported in December.
Duplicate Payments (IDEA)					Final		Reported annually
Accounts Receivable (AR)					Final	Reasonable	Included in this report.
Council Tax and NNDR					Final	Reasonable	Included in this report.
Housing Benefits					Final	Assurance	Reported in September.
Fleet and Hire Cars					Final	Reasonable	Reported in December.
IT Assets (including mobile phones)					Final	Reasonable	Reported in September.
Blue Badges					Final	Assurance	Reported in September.
Software Development					Final	Reasonable	Included in this report.
Finance							
Capital Accounting					Fieldwork		
Treasury Management					Fieldwork		
Tax Evasion					Draft		
Key Controls					Fieldwork		
UNESCO and Interreg 1					Final	Assurance	Reported in September.
UNESCO and Interreg 2					Added Final	Assurance	Reported in September.
Neighbourhoods							
Car Parking					Draft		



Audit	Full	First Follow-up	Second Follow-up	Grant	Status	Assurance Level	Comments
Highways PFI/Ministry of Justice Land					Suspended		Project not at a point where audit would be of value; rescheduled to 2024/25.
Disabled Facilities, Process Review					Final	Reasonable	Included in this report.
Regulatory Compliance (Environmental Health/Food Safety Standards)					Final	Reasonable	Included in this report.
Bereavement					Final	Reasonable	Reported in September.
Disabled Facilities					Final	Assurance	Reported in December.
Local Transport Capital Funding					Final	Assurance	Reported in September.
Bus Subsidy					Fieldwork		
Public Health							
Public Health Outcomes					Final	Assurance	Reported in September.
Regeneration							
Venture Quay					Final	Reasonable	Included in this report.
Asset Disposals					Draft		
Planning and Enforcement					Draft		
Strategy & Corpora	te						
Contract (TBC from across the organisation)					Suspended		Replaced with additional audits on compliance, fraud and governance.
Budget Savings	•				Fieldwork		
Risk Management (directorate arrangements)					Final	Reasonable	Included in this report.
Gouldings Project					Final	Assurance	Reported in December.
Compliance					Fieldwork		Additional review, assessing level of compliance for a



Audit	Full	First Follow-up	Second Follow-up	Grant	Status	Assurance Level	Comments
							range of corporate expectations.
Governance					Fieldwork		Additional review, assessing governance arrangements for a range of initiatives previously managed within Regeneration
Fraud					Fieldwork		Additional review, focussed on identifying gaps is fraud arrangements.