Internal Audit Progress Report



City of Lincoln Council December 2019





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The matters raised in this report are only those that came to our attention during the course of our work – there may be weaknesses in governance, risk management and the system of internal control that we are not aware of because they did not form part of our work programme, were excluded from the scope of individual audit engagements or were not bought to our attention. The opinion is based solely the work undertaken as part of the agreed internal audit plan.

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Introduction

The purpose of this report is to:

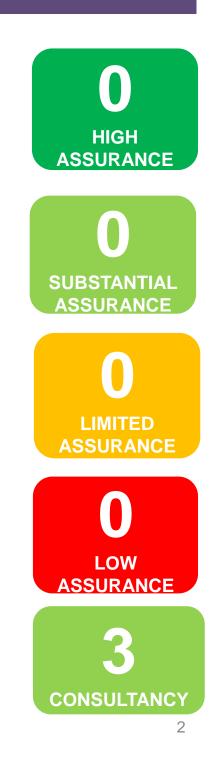
- Provide details of the audit work during the period September to November
- Advise on progress with the 2019/20 plan
- Raise any other matters that may be relevant to the Audit Committee role

Key Messages

During the period we have finalised three consultancy pieces of work;

- Fire Safety
- Values & Behaviours
- Healthcheck against Northamptonshire County Council failings

Audit Plan progress is at 53%, against a target of 66%.



Assurances

No assurance work has been finalised in this period.

Note: The assurance expressed is at the time of issue of the report but before the full implementation of the agreed management action plan. The definitions for each level are shown in Appendix 1.

Our report and agreed actions on High Rise accommodation have fed into a wider corporate action plan addressing the key points from the Hackitt report and external fire risk assessments.

Fire Risk

Good progress is being made and Corporate Health and Safety are maintaining an overview of this progress.

Further details will be provided at the next meeting.

We undertook a review on values and behaviours. The Executive and Corporate Management Team have prime responsibility for establishing the governance framework and for defining and analysing organisational culture by promoting good core values and behaviours. Specifically, we focussed on five 'strands' that support effective values & behaviours, namely:

- Leadership & Management
- People
- Culture Values & Consistency
- Processes and procedures
- Assurance and accountability

Values & Behaviours

Under each strand are a range of good practice measures and each has been assessed for existing and any developing processes. Overall we found that the Council performed well against the strands. We found many examples of good practice including an established set of core values, strategic plan training, up to date codes of conduct & induction for members and staff and updated staff appraisal process linked to core values and behaviours, a successful health & wellbeing programme for staff, whistleblowing and anti-fraud & corruption policies, protocol on member/officer relations. Agreed actions to further enhance values and behaviours are included below:

Leadership and Management

 Behaviours to support the core values are contained in the code of conduct but a new draft staff charter (the Lincoln Way) sets out overall expectation of behaviours for employees and managers which is now part of remit of the One Council Organisational Development pillar. This charter will support managers and employees to take a more effective approach to performance and behaviours. These expectations relate to mutual respect, training and regular one to one meetings.

People

- Further development and communication of core values and conduct

 effectively what this means in practice and examples of the types of
 behaviour expected is planned through the staff charter/Lincoln Way.
 The employee engagement strategy will also support ongoing
 engagement.
- A staff survey was previously undertaken in 2017 and in 2019/20 there will be feedback/consultation on "where the organisation is now" linked to the new "Lincoln Way" and points from the values and behaviours review will also inform. The arrangements for any future staff surveys will be considered as part of the engagement action plan once the "Organisational Development" pillar work is concluded.
- As part of leadership development managers (through a new "Lincoln Leader" model) will be given further training on dealing with /managing poor behaviours

Culture, Values and Consistency

• This commitment will be further enhanced through the role out of the Staff Charter/Lincoln Way which will demonstrate a commitment to compliance. This will cascade down through recruitment, appraisals and leadership training.

Processes and Procedures

- The Council has got clear policies and procedures for standards of conduct. Ensuring appropriate access to these through City People (intranet) and Net Consent (policy/guidance repository) will help further and a review of these systems is currently underway to ensure there is no duplication and access is straightforward.
- Further promotion/communication to employees that the whistleblowing policy is not just about reporting fraud will help embed this policy alongside disciplinary, dignity at work and grievance policies.
- The Monitoring Officer will review and enhance existing guidance around gifts and hospitality. There will be specific ongoing communication on the importance of declaring gifts and hospitality and interests and an increase in review frequency by the Monitoring Officer and CX.

Assurance and Accountability

 Some aspects around culture, core values and behaviours are still developing and this includes assurance mechanisms linked to the Staff Charter/Lincoln Way.

Values & Behaviours

Background

In March 2018 a Best Value (BV) Inspection report was issued concerning the financial issues that had affected Northamptonshire County Council (NCC).

Although the issues were as a result of budget pressures in services which District Councils do not provide (Adult Social Care and Children, Families & Education) there are still lessons to be learned about how the issues were handled.

In conjunction with Assurance Lincolnshire colleagues at the County Council we have turned the findings of the Best Value Inspection into a healthcheck, which we have used to highlight if there are any areas missing from the Council's Combined Assurance Map and whether they have been recently reviewed.

Following the issue at NCC other Local Authorities have also experienced severe financial difficulties. Birmingham City Council were issued with a Section 24 notice by their External Auditor, acting as a warning shot to get its finances in order, and seen by many as a precursor to a Section 114 notice. In addition a number of other authorities, primarily upper tier at this stage, announced that they were stripping back services to statutory services only in response to increasing service demands and funding reductions.

NCC Best Value Inspection findings

The BV Inspection reviewed the period 2013/14 -2017/18 and found that there were plenty of warning signs which NCC did not act on;

- an inadequate Ofsted report in August 2013
- adverse External Audit VFM opinions in 2015/16 and 2016/17
- the findings of an LGA Finance Peer Review in September 2017
- a Section 114 notice by the Council's S151 officer in February 2018
- a KPMG Advisory Notice on the Budget in February 2018

The Inspection identified a number of causes of failure;

- Budget setting & monitoring;
 - Weak budgetary control
 - No strong & effective scrutiny of budget setting
 - Did not address regular budget overspends
 - Lack of accurate financial data (Adult Services)
 - o Forecasting of demographic growth was very basic

Healthcheck against Northants County Council failings

- Lack of understanding of the difference between a budget pressure (that needs to be managed), contingency sums, spending where there is a choice and what is truly inescapable
- Took until 2018 to introduce appropriate advice in setting & managing budgets and the necessary control mechanisms to ensure compliance with the law and best practice
- Use of one-off resources
 - Made extensive use of one-off resources to support its ongoing revenue expenditure, primarily reserves
- Savings delivery / Transformation
 - Fell well short on delivering its planned savings
 - No business plan and no clear link to the MTFS
 - o Used capital receipts to fund transformation
 - No specific (project by project) transformation plan approved – this is non-compliance with Statutory Guidance, which puts in doubt the use of capital receipts for this purpose
 - No reports on the outcomes of transformation work (first one went to Cabinet in March 2018)
 - Structure / Culture;
 - o Silo working
 - o poor internal communication
 - o lack of working together on common objectives
 - Goals & outcomes;
 - Ambitious goals, lack of measurable outcomes and unclear how the approved budget will support these goals (Children's Services)
- Skills;
 - Lack of commissioning expertise
- Scrutiny;
 - Lack of effective scrutiny by Scrutiny committees
 - Lack of effective scrutiny by Audit committee
 - Challenge and criticism was discouraged
 - Refusing to provide information to councillors when requested
 - No action (by Cabinet / Council) on the adverse VFM opinions in either ISA 260 reports after consideration by Audit committee
 - No strategic action (by Cabinet / Council) on the LGA report after consideration by Audit committee
- Risk management;
 - Poor risk management at the Council & Audit committee unable to get it taken seriously

Healthcheck against Northants County Council failings

- Internal Audit Lack of flexibility in internal audit due to the way it is provided
- Complaints Poor approach to complaint handling, learning from mistakes and remedying injustice

COLC Healthcheck findings

The healthcheck looked at the areas of failure at NCC and considered if they were in the 2019 Combined Assurance Map for COLC and when they were last examined.

| Cause of Failure (at NCC) | In COLC Assurance Map | Management Assurance (2019) | Audit Coverage |
|---------------------------------|-----------------------------|-----------------------------------|---|
| Governance | Yes | Green | Within last 3 years |
| Budget setting (MTFS) | Yes | Amber | None in last 5 years |
| Budget monitoring | Yes | Green | Within last 3 years |
| Transformation | Yes | Amber | Within last 3 years |
| Scrutiny | Yes | Green | None, but in 20/21 Plan |
| Risk Management | Yes | Green | Within last 3 years |
| Complaints | Yes | Green | None in last 5 years, but annual report to Audit cttee |
| Procurement | Yes | Green | Within last 3 years |
| Values & Behaviour | Yes | Amber | Audit in 19/20 |
| Performance management | Yes | Green | Within last 3 years and in 19/20 Plan |

Healthcheck against Northants County Council failings

Summary and Way forward

All of the causes of failure at NCC are in the Assurance Map for COLC and have a Green or Amber assurance.

The majority of the causes of failure at NCC have been subject to audit at COLC within the last three years. There are three areas that have not had any audit coverage in the last five years; Budget setting / Medium Term Financial Strategy, Complaints and Scrutiny.

Scrutiny was in the 19/20 Plan but has been moved into 20/21 and the other two will be considered for audit in 2020/21.

CIPFA have recently produced a Financial Management Code and a Financial Resilience Index and these would be included in the Budget setting/MTFS review.

An update on the Financial Management Code and a Financial Resilience Index will be provided by the Chief Finance Officer at the February 2020 meeting.

Healthcheck against Northants County Council failings

- The CIPFA Financial Management Code (CIPFA FM Code) is designed to support good practice in financial management and to assist local authorities in demonstrating their financial sustainability. The CIPFA FM Code therefore sets the standards of financial management for local authorities.
- CIPFA's Resilience Index, released to finance directors of English councils in December 2018, is a tool that enables authorities to view their positions, relative to others, on a range of measures linked to financial risk.
- The latest version of the Index follows a consultation which received over 180 responses and will be made publicly available online in December 2019.

Internal Audit will continue to review the frequency at which the key areas are audited to ensure that it is appropriate.

The healthcheck areas are indicators of good governance but a positive assessment does not guarantee that the Council will not have any financial issues in the future.

Election Expenses

The claim for the European elections held in May has been checked and no issues were found.

Partnership Governance

Internal Audit have worked with officers to review Partnership guidance. Assistant Director Group and Service Managers will now review and update the Partnership Register with the aim of identifying the key partnerships so that they can be assessed at the end of the year.

The results will be included in an annual Partnership assurance report which will be presented to this Committee.

HMO Licensing Follow up

A 2017/18 HMO Licensing audit gave Limited assurance and made 13 recommendations (5 High & 8 Medium).

We have undertaken a detailed follow up (including testing) and found that;

- 9 recommendations (2 High & 7 Medium) have been fully implemented
- 4 recommendations (3 High & 1 Medium) require some further action to ensure that procedures are being consistently applied

Other work

We are happy with the progress that has been made – the further action required is not significant. The target date for these actions will be set at March 2020, at which time management will be asked to confirm if they are complete.

Management response from the Environmental Health & Corporate Safety Manager;

Following the HMO audit the private sector housing team have worked together to successfully implement many of the audit recommendations which has significantly improved how we manage and monitor licenced HMO's in the City. There are some further improvements to the operational procedures that we are aware of and we will look to complete these in the next few months, however, none of the improvements identified are a risk to the licencing framework.

Project Management

Our draft report has fed into a current post implementation review (PIR) of the Lincoln Project Management Model (LPMM) due to report January / February 2020.

Further details will be provided at the next meeting.

Audit reports at draft stage

There are three audit reports at draft report stage;

- Housing Rents with management for approval
- Recruitment with management for approval
- Project Management

Work in Progress

The following audit's are in progress;

- Payroll
- Licensing
- Treasury Management
- ICT Anti-Malware arrangements
- Sports Pitches improvements
- Homelessness
- · Efficiency Savings
- Western Growth

Quarter 4 Audits

- Economic Development/Growth
- Performance management (AL)
- Website security/Office 365 projects
- IT Combined Assurance ISO27001
- · Governance / Risk management
- Refuse contract
- De Wint Court contract / project management

Other work Q3/Q4

- Combined Assurance
- Audit strategy and plan 2020/21

Counter Fraud

- Risk register update (December)
- Policy review (Bribery/Whistleblowing) (December)
- NFI completion Ongoing
- Tenancy fraud Ongoing
- Counter fraud training December
- Fraud Health check Quarter 4
- Money Laundering risk assessment Ongoing
- Identity fraud Quarter 4
- Friends against scams Ongoing



Changes to the Audit Plan

Following discussions with the Chief Executive and Chief Finance Officer two audits in the Plan are being removed;

- Housing Repairs (10) focussing on the interaction between the maintenance and investment teams. The Assistant Director Investment is undertaking some work on this over the next 18 months so the audit will be postponed until 21/22.
- Housing Allocations (5) focussing on the New Build allocations process. This piece of work was requested by the CX but since then a Post Implementation Review report has been produced which has covered everything

Community Safety audit. The scope was originally City Centre intervention, safeguarding and licensing but following discussion with officers the audit focus was agreed as licensing only (with safeguarding aspects).







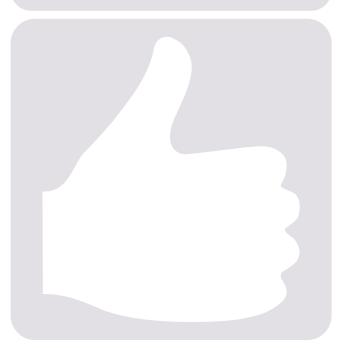
Internal Audit's performance is measured against a range of indicators. The statistics below show our performance on key indicators year to date.

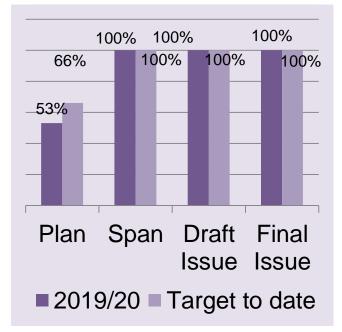
Performance on Key Indicators



Rated our service Good to Excellent







Lincolnshire Audit Committee Forum

A Lincolnshire Audit Committee forum took place on 1st October.

Agenda items were;

- Cyber Psychology / Security (Information Governance Officer, LCC)
- Audit Update (Chief Executive, Public Sector Audit Appointments)
- Risk in focus Horizon scanning (Manager, Mazars)
- Assessment on Risk Register and Annual Governance Statements (Head of Internal Audit, LCC)
- View from the Chair (Chair of the Joint Independent Audit Committee, Lincolnshire Police & Crime Commissioner)

The presentations were emailed to members after the meeting.

Audit Committee Forum - Public Sector Audit Appointments update

No opinion at 31 July in 214 out of 497 local government bodies.

Three main reasons;

- Technical issues not resolved
- Audit resources shortfall
- Issues with accounts and working papers.....

Additionally, group issues is an emerging issue.

Need to complete them as soon as possible & plan for 19/20

Draft new NAO Code of Audit Practice: Move to VFM arrangements commentary. Commentary aims to make better use of the work auditors already do and change the focus of how they report their findings to help bodies understand what they need to do.

Commentary to cover three areas

-Financial sustainability: how the body plans and manages its resources to ensure it can continue to deliver its services

- Governance: how the body ensures that it makes informed decisions and properly manages its risks; and

-Improving economy, efficiency and effectiveness: how the body uses information about its costs and performance to improve the way it manages and delivers its services

There are none.

| 4 | Appendix 2 | Assurance Definitions |
|---|-------------|---|
| | High | Our critical review or assessment on the activity gives us a high level of confidence on service delivery arrangements, management of risks, and the operation of controls and / or performance. |
| | | The risk of the activity not achieving its objectives or outcomes is low. Controls have been evaluated as adequate, appropriate and are operating effectively. |
| | Substantial | Our critical review or assessment on the activity gives us a substantial level of confidence (assurance) on service delivery arrangements, management of risks, and operation of controls and / or performance. |
| | | There are some improvements needed in the application of controls to manage risks. However, the controls have been evaluated as adequate, appropriate and operating sufficiently so that the risk of the activity not achieving its objectives is medium to low. |
| | Limited | Our critical review or assessment on the activity gives us a limited level of confidence on service delivery arrangements, management of risks, and operation of controls and / or performance. |
| | | The controls to manage the key risks were found not always to be operating or are inadequate. Therefore, the controls evaluated are unlikely to give a reasonable level of confidence (assurance) that the risks are being managed effectively. It is unlikely that the activity will achieve its objectives. |
| | Low | Our critical review or assessment on the activity identified significant concerns on service delivery arrangements, management of risks, and operation of controls and / or performance. |
| | | There are either gaps in the control framework managing the key risks or the controls have been evaluated as not adequate, appropriate or are not being effectively operated. Therefore the risk of the activity not achieving its objectives is high. |
| | | |

See separate report

Appendix 4 2019/20 Audit Plan to date

| Audit | Scope of Work | Start Planned date | Start Actual date | End Actual date | Status/ Rating |
|------------------------|--|--------------------------|-------------------------|-----------------------|----------------------|
| Chief Executive - | - Critical Activities | | | | |
| Recruitment | Internal promotions and external recruitment | Q1 | June | | In progress |
| Treasury Management | Investments & borrowing | Q2 | Nov | | In progress |
| Efficiency Savings | Programme & project arrangements | Q4 | | | Prepared |
| Payroll | Risk Based Audit | Q3 | Nov | | In progress |
| Scrutiny | Scrutiny committee operation & Member training | N/A | | | Deferred Q1 20/21 |
| Apprentice scheme | Financial arrangements | N/A | | | Deferred Q1 20/21 |

Housing & Regeneration – Critical Activities

| Housing ASB | Advice work – budgets | Q1 | April | June | Completed |
|------------------------|---|-----|-------|------|------------------------------------|
| Rental income | Risk Based Audit, to include Universal Credit impacts | Q2 | July | Nov | Draft report |
| Housing Allocations | New Build allocations process | Q2 | | | PIR done– no longer required |
| Housing Repairs | Interaction between reactive repairs & planned maintenance | N/A | | | Deferred 21/22 |
| Homelessness | Implementation of the Homeless Reduction Act | Q3 | | | In progress |
| Housing Strategy | Implementation of the Housing Strategy including links with Major Development | N/A | | | Deferred Q1 20/21 |
| Housing Allocations | Accuracy and processing arrangements on the new IT system | Q4 | | | |

| Audit | Scope of Work | Start Planned date | Start Actual date | End Actual date | Status/ Rating |
|---|---|--------------------------|-------------------------|-----------------------|----------------------|
| Communities & Environment – Critical Activities | | | | | |
| Sport & Leisure pitches | Contract and operation review | Q2-3 | June | | In progress |
| Private Sector Housing follow up | Follow up of 17/18 HMO audit plus Private Sector Housing in general | Q2 | Oct | Nov | Completed |
| Community Safety | Licensing | Q2-3 | Oct | | In progress |
| Performance management | Operation of the new PM system | Q4 | | | |
| Major Developme | ents – Critical Activities | | | | |
| Growth & Regeneration | Strategies, investment, partnerships, infrastructure | Q4 | | | Prepared |
| Financial & Gove | rnance | | | | |
| Counter Fraud | Fraud Strategy actions | Q1-4 | | | In progress |
| Counter Fraud | Tenancy Fraud data matching | Q1-4 | | | ln progress |
| Counter Fraud | NFI data matching | Q1-4 | | | In progress |
| Counter Fraud | Friends against Scams | Q1-2 | | | In progress |
| Counter Fraud | Fraud Training | Q1-2 | | | In progress |
| Counter Fraud | Identity fraud | Q2 | | | In progress |
| Welfare Reform | UC rollout and Welfare Advice | N/A | | | Deferred Q1 20/21 |
| Counter Fraud | Fraud risk register update | Q3 | | | In progress |
| Counter Fraud | Counter Fraud healthcheck | Q3-4 | | | |
| Counter Fraud | Money Laundering risk assessment | Q3-4 | | | |

| Audit | Scope of Work | Start Planned date | Start Actual date | End Actual date | Status/ Rating | |
|--------------------|---|--------------------------|-------------------------|-----------------------|--------------------------------|--|
| Financial & Gove | rnance (cont'd) | | | | | |
| Counter Fraud | 6 & 12 month reports | July 19 | | | 12 mth report in July 19 | |
| | | Dec 19 | | | Completed | |
| Counter Fraud | Policy reviews | Q3-4 | | | | |
| Governance & Ri | sk | | | | | |
| Governance | Key controls for annual assurance | Q4 | | | | |
| Risk Management | Key controls for annual assurance | Q4 | | | | |
| Information Mana | agement & Technology | | | | | |
| ICT | Assurance mapping and plan | Q1-2 | | | Completed | |
| ICT | IT map follow up and Strategy actions | Q4 | | | | |
| ICT | Anti-Malware arrangements | Q3 | Oct | | ln progress | |
| ICT | New Website | Q4 | | | | |
| ICT | Mobile Working/Office 365 Pilots | Q4 | | | | |
| Projects | | | | | | |
| Western Growth | Programme governance and project management | Q3-4 | | | Being prepared | |
| De Wint Court | Project and contract arrangements | Q3-4 | | | RM support | |
| | | | | | Contract audit Q3-4 | |

| Audit | Scope of Work | Start Planned date | Start Actual date | End Actual date | Status/ Rating |
|--------------------------|--|--------------------------|-------------------------|-----------------------|--------------------------------|
| Consultancy / VF | M / No opinion work | | | | |
| Emerging Legislation | Preparation for new and emerging legislation & policy (merged with 18/19 work) | Q1 | | May | Completed Full assurance |
| Brexit | Assist with risk and control issues as part of working group | Q1 | Q1 | Q4 | In progress |
| Refuse & Recycling | Procurement arrangements | Q4 | | | |
| Other work | | | | | |
| 2018/19 audits | Complete audits from previous year | Q1 | April | | At draft report |
| Annual IA report | Report for 2018/19 | Q1 | April | May | Completed |
| Housing allocations | Serious offenders risk assessment | Q1 | June | June | Completed |
| De Wint project | Risk management support | Q1-4 | April | | Ongoing |
| Follow up | Review progress on audit recommendations | Q1-4 | | | Ongoing |
| Advice, Management | Advice & management, reactive investigations | Q1-4 | | | Ongoing |
| Combined Assurance | Update the assurance map | Q3-4 | | | |
| IA Strategy & Plan | New Plan for 2020/21 | Q4 | | | |
| Housing Benefit Subsidy | | | | | |
| 2018/19 Subsidy claim | 2018/19 HB Detailed testing on behalf of External Audit | Q1-2 | May | July | Completed |