

High Importance Recommendations – Position at 22nd June 2021

<u>Audit Title (Owner)</u>	<u>Summary of Finding(s) and Recommendation(s)</u>	<u>Management Response</u>	<u>Action Date (by end of)</u>	<u>Confirmed Implemented</u>
Reported July 2021				
Government Procurement Cards (Chief Accountant)	<p>This report was finalised in March 21, whilst no Hi Importance recommendations were raised, there were a number of medium recommendations which has resulted in a Partial assurance being given. Some of the key weaknesses related to:</p> <ul style="list-style-type: none"> • absence of receipts and VAT invoices • lack of managers approval of new applications and review of submitted claims • no checks to deactivate cards after staff have left • no review to ensure continued business need for the cards. 	<p>Management have agreed and implemented the recommendations and reminders have been sent to card holders to remind them of the guidance and expectations. Further internal audit follow-up is planned in Qtr2 to ensure improvements have been made.</p>	Sept 21	
Reported March 2021				
Social Value within Procurement (Head of Procurement Services)	<p>One High Importance recommendation was made in this audit report.</p> <p>Finding: Sample testing identified:</p> <ul style="list-style-type: none"> • Monitoring arrangement for Social Value (SV) Key Performance Indicators (KPIs) was not specified in the sample contracts • there was no evidence to confirm that contract managers were monitoring the suppliers to ensure they had delivered 	<p>The Head of Procurement is working with IT Procurement and Digital Transformation colleagues to procure a new system for which budget and approval to procure has been agreed. Preparation for procurement is almost complete and it is anticipated that a new system will be procured and implemented later in 2021</p>	<p>July 21</p> <p>Extended to Dec 21</p>	

	<p>their commitments and fulfilled their contractual obligations with regards to SV.</p> <p>Recommendation: The monitoring arrangements of SV - KPI's should be determined and included in the contract; these should be actively monitored by contract managers and periodically reported.</p>			
Reported September 2020				
Concessionary Travel (City Transport Director)	<p>Internal Audit assessed there to be partial assurance over the adequacy and effectiveness of governance arrangements and internal control in the operation of the concessionary travel scheme. The report included 4 High Importance recommendations, which are summarised below.</p> <p>Findings: The audit identified inconsistencies in the issuing and retention of processed application forms; outdated trading agreements which were not aligned to service delivery. Recharge and journal process was found to be weak; payments and journals were made without adequate supporting information.</p> <p>Recommendations included: 1. Review of the current arrangements for issuing passes which is consistent with the requirements of Information Governance Officer (IGO).</p>	<p>1. The online portal has been mostly developed and went through internal testing and external testing with some of the disability access group contacts. It has raised a few minor issues and a major one (to do with the uploading of photographs for passes) which have gone back to the developer for rectification. With the exception of the major report, this has been received positively by external testers and we hope to have a finished product live before the end of the year.</p> <p>2-4. There is no need to review the trading agreement as this is no longer in force. The detailed breakdowns from county will no longer be required as this process is now in house. Concessionary payments are continuing to be paid at pre-covid levels while the Covid Bus Services Support Grants (CBSSG) are still in place. There are separate audits being undertaken relating to the CBSSG grants.</p>	<p>Oct 20</p> <p>Extend to Mar 2021</p> <p>Extend to June 21</p>	<p>Yes</p>

	<p>2. A new Trading Agreement should be drawn up and terms and conditions adhered to.</p> <p>3. All charges should be verified to supporting evidence prior to authorising invoice payments.</p> <p>4. Working papers should be retained to support calculations for the year end estimates.</p>			
Reported June 2020				
Schools' Governance – (LA Scheme for Financing Schools)	<p>The Audit highlighted one High Importance recommendation:</p> <p>Finding: The Scheme for Financing has not been amended to reflect the mandatory revisions as notified in the DfE directed revisions dated 19/08/2015 or 22/03/2018.</p> <p>Recommendation: The Scheme for Financing Schools should be updated to reflect any directed revisions as notified by the DfE.</p>	The Scheme for financing is currently being updated with a view to completing by the end of August 21, this will include directed revisions as notified by the DfE	<p>June 20</p> <p>Dec 20</p> <p>June 21</p> <p>Extend to Aug 21</p>	
St Barnabas Cof E Primary School (Acting Headteacher)	<p>A significant number of findings and recommendations were made in the Internal Audit report, which resulted in a partial assurance being given. The report included nine High Importance recommendations, which included areas of governance, budget monitoring, banking, payroll and business continuity plan. All the recommendations were agreed with the two Assistant</p>	The Pay policy has been updated and approved at Full Governors Meeting on 11th March 2021.	<p>June 20</p> <p>Oct 20</p> <p>Dec 20</p> <p>Extend to June 21</p>	<p>1. Yes</p> <p>2. Yes</p>

	Headteachers, who in the absence of the Headteacher were managing the school at the time of the audit. Positive responses were received to the report; it was reported that a new Business Manager was due to be appointed, who would further assist in the implementation of recommendations.			
GDPR (Data Protection Officer - DPO)	<p>Within the earlier audit (Nov 18) it was confirmed that although Information Asset Registers (IAR) had been completed by relevant sections, gaps had yet to be identified – this could potentially lead to Data/Information breaches as gaps in compliance are not identified.</p> <p>Two High Importance recommendations were made:</p> <p>1. The Data Protection Officer should put forward a proposal to Senior Management if it is considered there is a need for additional resources to be allocated to undertake meetings with the Information Asset Owners in order to complete the IAR's and associated action plans.</p> <p>2. Meetings with Information Asset Owners should be undertaken as a matter of urgency to identify possible gaps in meeting Data Protection Act requirements. These gaps should then form sectional action plans which the relevant section should be monitored against.</p>	<p>1. The Information Governance annual report had this as a recommendation, and it went to CMT in March 2021. The DPO is currently working with Managers and HR to put forward a proposal for resourcing and an organisational review for Information Governance.</p> <p>2. This action has not yet been completed, as cannot implement this recommendation until action 1) regarding additional resources is completed.</p>	<p>Jan 2021</p> <p>June 2021</p> <p>Extend to Sept 2021</p> <p>Dec 2021</p>	
Hazel Community Primary School (Headteacher)	A number of recommendations were made to the school, whilst none of these were individually categorised as High Importance,	Following the appointment of the new Business Manager, the school has continued to make progress with implementation of the	<p>April 20</p> <p>Oct 20</p>	Yes

	but collectively this resulted in a partial assurance. Some of the key areas of weakness included governance, financial planning, budgetary control, Income collection & banking and Data Security.	recommendations. Internal Audit are satisfied with the progress and closed this audit off.	Dec 20 Extend to June 2021	
Reported November 2019				
SEND Funding (Director Adult Social Care & Commissioning)	<p>This audit identified a number of significant areas for improvement; four High importance recommendations were included in the report:</p> <ol style="list-style-type: none"> 1. A lack of quality assurance checks to confirm that SEND funding was being spent appropriately, with a particular focus on value for money and children’s outcomes. 2. No clear policy or process in place to allow the LA to identify and use clawback procedures to reclaim any unspent or incorrectly spent SEND funds. 3. Lack of robust reporting mechanisms to allow the Special Education Service (SES) team to track and trace changes to pupil circumstances in a timely manner, which can lead to overpayments being made to a school. 4. There was no clear reconciliation procedures to ensure payments made to individual providers are accurate and in line with approved rates. 	<p>All recommendations from the initial audit report were agreed by management. Testing undertaken to determine the progress made against the individual high importance recommendations, highlighted:</p> <ol style="list-style-type: none"> 1. Management have introduced and implemented several quality assurance controls to ensure SEND funding is being spent appropriately. These include a panel which meets monthly to review pupil provisions and the costs associated with this, as well as more detailed application forms for SEND funding, which require schools to justify and provide evidence for individual claims. 2. Management response received indicates that a review is under way and at the end of the consultation ‘we write to all schools with a new scheme including roles and responsibilities for the LA and schools and include a provision for clawback for unspent funding and funding not spent specifically on the children it’s been allocated to’. 3. Management have utilised the reporting function on the ‘One system’ to produce monthly reconciliations that enable the SES team to track and trace changes to pupil 	<p>Nov 19 June 20 Feb 21 Jun 21 Extended to Oct 21</p>	<ol style="list-style-type: none"> 1. Yes 2. Partially 3. Yes 4. Yes

		<p>circumstances in a timely manner. This allows the team to control costs and address any changes in funding arrangements on a child by child basis.</p> <p>4. Management have developed a three-way reconciliation procedure to ensure payments made are accurate and in line with approved rates, as per individual funding schedules.</p>		
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Audit/A&RC/210721/Follow-up/Appendix 2 HI Progress Report
Last Revised 22nd June 2021