SWAP
INTERNAL AUDIT SERVICES
Assuring – Improving – Protecting

Herefordshire Council

Report of Internal Audit Activity

Plan Progress 2018/19 Quarter 4

Internal Audit ▪ Risk ▪ Special Investigations ▪ Consultancy

Contents

The contacts at SWAP in connection with this report are:

Dave Hill
Chief Executive
Tel: 01935 848540
David.hill@swapaudit.co.uk

Ian Baker
Director of Quality
Tel: 07917628774
ian.baker@swapaudit.co.uk

Jacqui Gooding
Assistant Director
Tel: 07872500675
jacqui.gooding@swapaudit.co.uk

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Unrestricted

Internal Audit Plan Progress 2018/19

Our audit activity is split between:

- **Operational Audit**
- **School Themes**
- **Governance Audit**
- **Key Control Audit**
- **IT Audit**
- **Grants**
- **Other Reviews**

Role of Internal Audit

The Internal Audit service for Herefordshire Council is provided by SWAP Internal Audit Services (SWAP). SWAP is a Local Authority controlled Company. SWAP has adopted and works to the Standards of the Chartered Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS), and the CIPFA Local Government Application Note. The Partnership is also guided by the Internal Audit Charter approved by the Audit and Governance Committee at its meeting on 21 March 2018.

Internal Audit provides an independent and objective opinion on the Authority's control environment by evaluating its effectiveness. Primarily the work includes:

- Operational Audit Reviews
- Cross Cutting Governance Audits
- Annual Review of Key Financial System Controls
- IT Audits
- Grants
- Other Special or Unplanned Review

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 1

Unrestricted

Outturn to Date

Internal Audit Work Programme

The schedule provided at Appendix C contains a list of all audits as agreed in the Annual Audit Plan 2018/19. It is important that Members are aware of the status of all audits and that this information helps them place reliance on the work of Internal Audit and its ability to complete the plan as agreed.

Each completed assignment includes its respective "assurance opinion" rating together with the number and relative ranking of recommendations that have been raised with management. In such cases, the Committee can take assurance that improvement actions have been agreed with management to address these. The assurance opinion ratings have been determined in accordance with the Internal Audit "Audit Framework Definitions" as detailed in Appendix B of this document.

To assist the Committee in its important monitoring and scrutiny role, in those cases where weaknesses have been identified in service/function reviews that are considered to represent significant service risks, a summary of the key audit findings that have resulted in the audit receiving a 'Partial Assurance Opinion' is given as part of this report.

In circumstances where findings have been identified which are considered to represent significant corporate risks to the Council, due to their importance, these issues are separately summarised.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 2

Unrestricted

Outturn to Date

➡ Internal Audit Work Programme

This is the quarter 4 update for 2018-19.   Sixteen audits have been completed since my last update and there are two audits at Discussion Document, two at Draft report and one in progress. Two audits were assessed as Substantial, eight as Reasonable assurance and three as Partial. One audit was an Advisory and two were Follow Up audits. Five priority 2 findings were identified across the three Partial audits.

The following audits have been completed since the last update:

Audit	Assurance
Corporate Peer Challenge	Reasonable
External Residential and Fostering Placements	Partial
NNDR	Reasonable
Troubled Families – Monthly assurance on claims to end of March 2019	Substantial
Integrated Short Term Support and Care Pathway - County Teams	Advisory
Section 20 Children Accommodated by the Local Authority	Reasonable
EU General Data Protection Regulation	Partial
P- Cards	Substantial
Development Regeneration Partnership	Reasonable
Internal Control Improvement Board	Reasonable
Prevention of Fraud School 1	Reasonable
Prevention of Fraud School 2	Reasonable
Prevention of Fraud School 3	Partial
Prevention of Fraud School 4	Reasonable
Serious and Organised Crime Audit checklist	Follow Up
Short Breaks - Children's Wellbeing	Follow Up

Unrestricted

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 3

SWAP INTERNAL AUDIT SERVICES
Assuring – Improving – Protecting

Significant Corporate Risks

Identified Significant Corporate Risks should be brought to the attention of the Audit and Governance Committee.

Significant Corporate Risks

We provide a definition of the 3 Risk Levels applied within audit reports. For those audits which have reached report stage through the year, I will report risks we have assessed as 'High'.

In this update there are no final reports included with 'High' corporate risks.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 4

Unrestricted

SWAP Performance - Summary of Partial Opinions

These are actions that we have identified as being high priority and that we believe should be brought to the attention of the Audit and Governance Committee.

Summary of Partial Assurances and Significant Service Findings (Priority 1 and 2)

Three audits assessed as Partial assurance reported five significant findings. The significant findings have been summarised below.

External Residential and Fostering Placements – Partial
The Council's Children and Families Directorate commissioning teamwork in partnership with the 13 other authorities in the West Midlands to develop and implement a regional framework or similar commissioning arrangements. These include the West Midlands Regional Foster Care Framework for foster care and the West Midlands Flexible Contracting Arrangement for the Provision of Placements in Children's Homes for residential provision. All requests for placements within Children and Families Directorate Social Care Teams have to be made through the Placements Team. All placements have to have prior approval from a senior manager within Children and Families Directorate. There is a Quality Assurance process built into both the region's foster care framework and flexible contracting arrangement for residential children's homes, with intelligence shared across authorities.

The scope of the audit was to review that there was a pre-placement agreement (PPA) contract with suitable foster care providers and that there is an individual placement agreement (IPA) in place, prior to each child or young person being placed.

The audit found that there were good controls for maintaining a list of all current placements and current providers. Standard Pre-Placement Agreement and Individual Placement Agreement forms were found to be used for placements commissioned via framework or similar contractual arrangements and for those placements made outside of these arrangements (spot purchase), the relevant national contract is used. The Commissioning Officer attends regular meetings of the Officers for Commissioning and Contracts Group (OCCG), which consists of officers representing Councils who are officers from the West Midlands authorities.

There were six priority 3 findings and one priority two finding. The priority two finding is detailed below:

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 5

Unrestricted

SWAP Performance - Summary of Partial Opinions

These are actions that we have identified as being high priority and that we believe should be brought to the attention of the Audit Committee.

Summary of Partial Assurances and significant service findings (Priority 1 and 2)

Not all placements reviewed had an Individual Placement Agreement (IPA) in place in the required timescale. Testing identified a control weakness, with 7 out of 11 of the sample not having a suitably authorised IPA in place prior to or within 10 days of a child or young person being placed in foster care.

Efforts have been made to address the lack of IPAs. However, work is still to be done in this area to ensure that each placement has a current IPA that has been signed by both the client and an authorised signatory within the Children and Families Directorate. The Placement Manager did advise that in practice 'we do not send an IPA/PPA prior to a placement as sometimes the child may not actually end up going into a placement and then have to retract the contract.'

A recommendation was made that an ongoing review of current placements is carried out to ensure that an IPA is set up for each client which has been signed off by the provider and an authorised signatory within Children and Families Directorate. The list should then be subject to periodic reviews (3-6 month) to ensure that all IPAS are in place and are current. Ongoing monitoring of completion of IPA's should be undertaken to avoid non-compliance with regulations.

The Head of Business Support confirmed that the outstanding backlog has been addressed, and that six monthly ongoing reviews will commence from June 2019.

EU General Data Protection Regulation – Partial
EU General Data Protection Regulation (GDPR) was enacted in May 2016 and came into force on the 25th of May 2018. The two years therefore allowed organisations a period in which to ensure that their current data processing activities are compliant with the requirements of the GDPR. The service design for the Information Governance (IG) Team is to provide policy, guidance, templates, awareness and training for services and the current operating model reflects this.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 6

Unrestricted

SWAP Performance - Summary of Partial Opinions

These are actions that we have identified as being high priority and that we believe should be brought to the attention of the Audit Committee.

Summary of Partial Assurances and Significant Service Findings (Priority 1 and 2)

As part of the 2017-18 audit plan a review was undertaken on GDPR Readiness for Implementation. The objective of this audit was to review that the processes are now in place and to provide assurance that there is an effective work plan in place, which is being measured and reported on to ensure that the organisation will be compliant with GDPR.

Since 25 May 2018 when GDPR was enacted, the Information Governance (IG) Team have included the completion of the annual NHS Digital Data Security and Protection Toolkit in readiness for the deadline of final submission on 31 March 2019 and have also rolled out an Information Governance GDPR compliant training programme for all Council staff. In addition to this work the IG team have seen an increase in requests for information and in the period since 25th May 2018 they have processed and responded to 115 Subject Access Requests, 68 Police Requests and 127 data incidents. Work has also been done to advise and assist with further data sharing, information security, privacy notice and data protection impact assessment requests from teams.

The audit reported five priority 3 and two priority 2 findings. The priority two findings are detailed below:

Several Council contracts let since 25 May 2018 sampled were found not to include direct reference to GDPR.
14 Council contracts let since 25 May 2018 and 11 contracts let since January 2019 across all Directorates were tested against the following two documents provided by the IG Team as being the minimum clauses, terms required to be included within contracts to comply with GDPR contractual clauses and schedules of information inclusions for processing personal and/or sensitive information since 25 May 2018-

•	Draft Schedule of Processing, Personal Data and Data Subjects
•	Generic Standard GDPR Clauses

There was inconsistency across the inclusion of the minimum clauses, terms required in the contacts tested. Some contracts:
- did not have any mention of GDPR but did cover DPA 1998 with a paragraph on Data Protection
- some contracts did include details of (EU) GDPR 2016/679;
-

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 7

Unrestricted

SWAP Performance - Summary of Partial Opinions

These are actions that we have identified as being high priority and that we believe should be brought to the attention of the Audit Committee.

Summary of Partial Assurances and Significant Service Findings (Priority 1 and 2)

- None of the sample of 14 contracts let since 25 May 2018 had Schedules of Processing, Personal Data and Data Subjects attached, there was however some improvement for the 11 contracts let since January 2019 where four contracts did have the schedules attached.

A recommendation was made that GDPR compliant clauses and processing templates are finalised, approved and signed off by senior management and included in standard contract terms and schedules for new contracts. The AD Corporate Support has agreed to finalise compliant clauses to be agreed as standard contract terms and schedules for new contracts and distribute to commissioners and include in procurement training with a target date of October 2019.

The Contracts Action plan identifying key activities in support of amending Council contracts to comply with GDPR has not been kept up to date.

The IG Team have in place a Contracts Action Plan. From the GRDP audits that took place services were given actions to complete. For the Contracts Action Plan 17 actions were required and at the time of the audit (May 2019) there were five Red outstanding actions and 11 Amber outstanding actions with dates for completion ranging from January 2018 through to April 2018.

Five Red Actions identified as still outstanding were:

- Implement clauses and processing template in standard contract terms and schedules for new contracts- March 2018

- Send out contract letter, variations and guidance to identified suppliers-April 2018

- Review frameworks and identify owners-no date identified

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 8

Unrestricted

SWAP Performance - Summary of Partial Opinions

These are actions that we have identified as being high priority and that we believe should be brought to the attention of the Audit Committee.

- Future monitoring of Contracts to be agreed – guidance-no date identified

- Publish all guidance available for providers-April 2018

Summary of Partial Assurances and Significant Service Findings (Priority 1 and 2)

This has identified the absence of a central control to provide a corporate oversight. This was first identified in the Compliance with Financial, Procurement and Contract Procedure Rules Audit (January 2019) - 'A centralised control should be put into place in support of the governance process before the Commercial Team assist with the procurement process in order to formally establish that all of key governance requirements have been fully completed.

A further recommendation has been made - that the centralised control be extended to include oversight of and assurance that all relevant GDPR clauses and Schedules of Processing are being included in new contracts.

The Chief Finance officer has agreed that the work carried out by Corporate Governance and the Commercial Teams will be reviewed to ensure responsibility and accountability for this is clearly understood across the Council. The target date for implementation is 30 November 2019.

Prevention of Fraud School 3 (Voluntary Aided) – Partial

A themed review of arrangements to prevent fraud in schools was carried out. Themed school reviews focus on a particular area of risk across a sample of schools, with results being consolidated into a report for the Local

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 9

Unrestricted

SWAP Performance - Summary of Partial Opinions

These are actions that we have identified as being high priority and that we believe should be brought to the attention of the Audit Committee.

Authority and Schools Forum. Where good practice or common weaknesses are identified, the Local Authority will disseminate the information to other schools to ensure weaknesses can be rectified and best practice shared.

There were two priority 2 findings:

The register of interest for all governors and staff who influence financial decisions was not complete.

A recommendation that the School ensures that a signed and dated declaration is obtained from all governors and all staff who are involved in financial decisions at the school was accepted by the Clerk of Governors and actioned immediately.

Summary of Partial Assurances and Significant Service Findings (Priority 1 and 2)

Nursery Income

The school receives Nursery income of £800 per month which is paid into the Governors Accounts. A payment of £800 per term i.e. £2400 per year is then paid into School official funds as a reimbursement of costs/overheads.

The school is voluntary aided, and it holds Governors Accounts (Voluntary Aided Funds accounts), which is used for capital works. Rental income from the Nursery is paid into the Governors Accounts with a small proportion reimbursed to the School official funds to cover costs/overheads.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 10

Unrestricted

As the income is not paid directly into the School Official fund advice was sought from the Hoople Senior Finance Manager as to whether this was the appropriate process. The Hoople Senior Finance Manager is satisfied for the process to remain as it is currently but has advised the School to ensure they are not liable to pay tax on the income from the nursery.

The Chair of Governors has agreed for the Governing Body to seek further advice on the matter (with Diocesan board and then as advised) with regards to tax to ensure compliance with a target date End of Summer Term 2019.

Unrestricted

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 11

Follow Up audits are completed where the auditor could only provide partial assurance.

Follow Up Audits

Follow Up Audits

Follow Up audits are completed where the auditor could only provide partial assurance. The follow-up audit is to provide assurance to the Director, Senior Management and the Audit and Governance Committee that the key risks have been mitigated to an acceptable level of risk. Evidence is obtained to demonstrate implementation and progress made in relation to all 2017-18 priority 4 and 5 recommendations (now Priority 1 and 2). For the priority 3 recommendations progress reported is based on self-assessment by relevant officers. The following table demonstrates progress against agreed actions at the time the follow up audits were completed.

Priority of recommendation	Complete	Overdue	Not yet due	In Progress	Superseded
Serious and Organised Crime					
4	1	0	0	0	0
3	5	1	0	0	0
Short Breaks – Children's Wellbeing					
4	3	0	0	0	0
3	1	1	0	0	0

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 12

Unrestricted

Added Value
Extra feature(s) of an item of interest (product, service, person etc.) that go beyond the standard expectations and provide something more while adding little or nothing to its cost.

Added Value

Primarily, Internal Audit is an assurance function and will remain as such. However, as we complete our audit reviews and through our governance audit programmes across SWAP we seek to bring information and best practice to managers to help support their systems of risk management and control. The SWAP definition of "added value" is "it refers to extra feature(s) of an item of interest (product, service, person etc.) that go beyond the standard expectations and provide something "more" while adding little or nothing to its cost".

The followings audits have provided a cross comparison survey for the SWAP Partners:

Lone Working Arrangements - As part of an audit of Lone Working Arrangements, SWAP requested information from all partners to confirm their approach to managing the safety of lone workers, with the aim being to compare arrangements and to identify examples of best practice.

Procurement - Following a request from one of our partners to support them in identifying solutions for the future delivery of their Procurement Service, a questionnaire was sent to all our partner sites to ascertain the approach taken to Procurement and Contract Management.

Fostering Allowances and Fees – the report provided a comparison of allowances and fees across several Councils.

Internal Communications – the report detailed the channels used by other partners to support internal communications across the council.

The findings of each survey have been shared with the SWAP Partners.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 13

Unrestricted

SWAP Performance - Summary of Audit Opinions

At the conclusion of audit assignment work each review is awarded a "Control Assurance Definition";

- **Substantial**
- **Reasonable**
- **Partial**
- **None**

We also undertake Advisory / Non-Opinion work on a consultancy basis where we have been asked to look at a specific area of potential concern.

Where we follow up on a previous adverse audit opinion the opinion is stated as follow up.

Summary of Audit Opinion

Of the reviews that have a final report, the opinions offered are summarised below.

Control Assurance by Category

- Substantial: 5.0%
- Reasonable: 49.0%
- Partial: 18.0%
- None: 0.0%
- Advisory: 10.0%
- Follow Up: 18.0%

Legend: ■ Substantial ■ Reasonable ■ Partial ■ None ■ Advisory ■ Follow Up

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 14

Unrestricted

Summary of Audit Recommendations by Priority

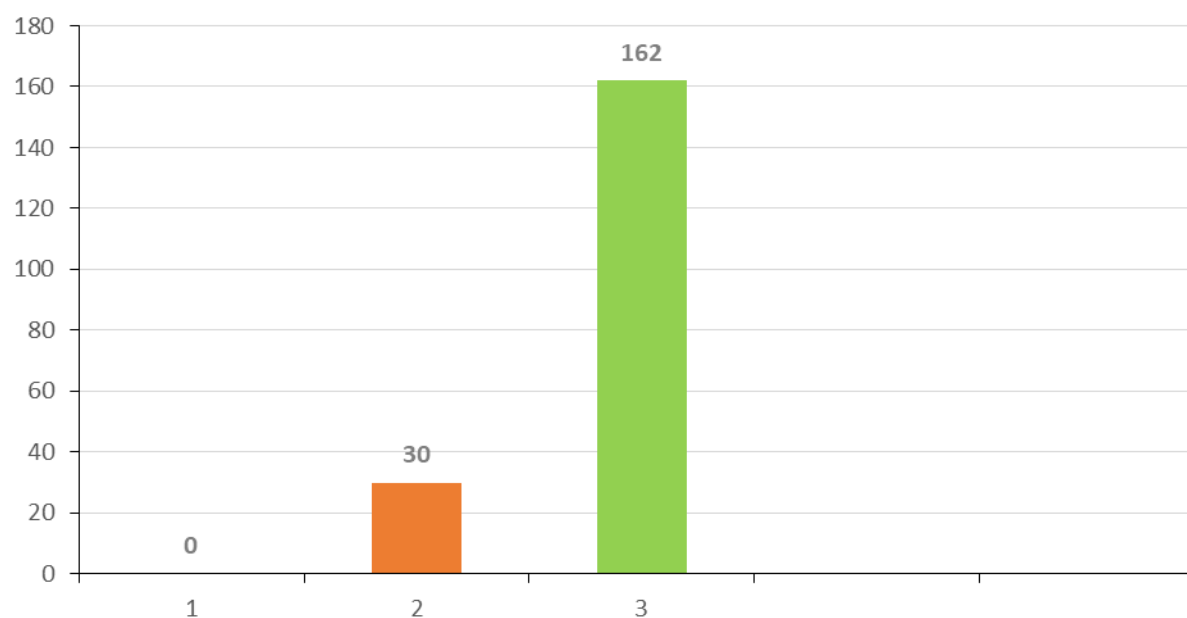**We rank our recommendations on a scale of 1 to 3, with 3 being medium or administrative concerns to 1 being areas of fundamental concern requiring immediate corrective action.**

Summary of Recommendations

Audit Recommendations by Priority

We keep our audit plans under regular review to ensure that we are auditing the right things at the right time.

Approved Changes to the Audit Plan

Unplanned work, special reviews or projects carried out on a responsive basis are requested through the Chief Finance Officer (Section 151 Officer). As new and emerging risks are identified, any changes to the plan will be subject to the agreement of the Chief Finance Officer (Section 151 Officer) and reported to this Committee.

The days for the Redundant Building Grant (RBG) Funding review remain in the 2018-19 plan. The scheme was due to complete its outputs in 2020/2021 but this has been achieved earlier. The RBG Project Officer has requested that the grant review is completed to coincide with close down of the scheme in July 2019.

Conclusion

Fifty-seven audits have been completed and there are four audits at report stage and one audit in progress. The completed audits are currently reporting 5% substantial assurance, 49% reasonable assurance and 18% partial assurance. There have been no significant corporate risks identified.

Recommendations have been made for improvement at service level and all findings have been accepted by management and a target date agreed for implementation. Although no areas of significant corporate risk have been identified there have been findings identified where Governance is not always followed to an acceptable level and corporate oversight is not in place. This has been recognised as an area for improvement and the Council new structure with a central corporate hub will assist in ensuring that adequate Governance and corporate oversight is implemented.

At the close of each audit review a Customer Satisfaction Questionnaire is sent out to the Service Manager or nominated officer. The aim of the questionnaires is to gauge satisfaction against timeliness, quality and professionalism. A score of 95% would reflect the fact that the client agreed that the review was delivered to a good standard of quality, i.e. agreed with the statement in the questionnaire and satisfied with the audit process and report. The current feedback score for the Council is 99%.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 16

Unrestricted

At the conclusion of audit assignment work each review is awarded a "Control Assurance Definition";

- **Substantial**
- **Reasonable**
- **Partial**
- **None**
- **Advisory**

Audit Framework Definitions

Control Assurance Definitions

Substantial	The areas reviewed were found to be adequately controlled. Internal controls are in place and operating effectively and risks against the achievement of objectives are well managed.
Reasonable	Most of the areas reviewed were found to be adequately controlled. Generally, risks are well managed, but some systems require the introduction or improvement of internal controls to ensure the achievement of objectives.
Partial	In relation to the areas reviewed and the controls found to be in place, some key risks are not well managed, and systems require the introduction or improvement of internal controls to ensure the achievement of objectives.
None	The areas reviewed were found to be inadequately controlled. Risks are not well managed, and systems require the introduction or improvement of internal controls to ensure the achievement of objectives.

Advisory - In addition, to our opinion-based work we will provide consultancy services. The advice offered by Internal Audit in its consultancy role may include risk analysis and evaluation, developing potential solutions to problems and providing controls assurance. Consultancy services from Internal Audit offer management the added benefit of being delivered by people with a good understanding of the overall risk, control and governance concerns and priorities of the organisation.

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 17

Unrestricted

Recommendation are prioritised from 1 to 3 on how important they are to the service/area audited. These are not necessarily how important they are to the organisation at a corporate level.

Audit Framework Definitions

Risk	Reporting Implications
	In addition to the corporate risk assessment it is important that management know how important the recommendation is to their service. There should be a clear distinction between how we evaluate the risks identified for the service but scored at a corporate level and the priority assigned to the recommendation. Each recommendation has been given a priority rating at service level with the following definitions:
Priority 1	Findings that are fundamental to the integrity of the service's business processes and require the immediate attention of management.
Priority 2	Important findings that need to be resolved by management.
Priority 3	Finding that requires attention.

Each audit covers key risks. For each audit a risk assessment is undertaken whereby with management risks for the review are assessed at the Corporate inherent level (the risk of exposure with no controls in place) and then once the audit is complete the Auditors assessment of the risk exposure at Corporate level after the control environment has been tested. All assessments are made against the risk appetite agreed by the SWAP Management Board.

Definitions of Risk

Risk	Reporting Implications
	Reporting Implications
High	Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.
Medium	Issues which should be addressed by management in their areas of responsibility.
Low	Issues of a minor nature or best practice where some improvement can be made.

SWAP
INTERNAL AUDIT SERVICES
Assuring – Improving – Protecting

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 18

Unrestricted

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major ↔ 3 = Medium Recommendation		
						1	2	3
Governance, Fraud & Corruption	New Model in Technology and Engineering (NMiTE) Project (University)	1	Completed	Reasonable	4	0	1	3
Governance, Fraud & Corruption	Joint Use Agreement - Ledbury Rugby Club	1	Completed	Advisory	2	0	0	2
Governance, Fraud & Corruption	Highways Projects – Financial Reporting	1	Completed	Partial	5	0	1	4
Operational	Building Control	1	Completed	Reasonable	7	0	0	7
Operational	Special Educational Needs Transport	1	Completed	Partial	7	0	4	3
Operational	Property Maintenance - Schools	1	Deferred to 2019-20	-	-	-	-	-
Operational	Internal Communications	1	Completed	Reasonable	5	0	0	5
Operational	Records Management	1	Completed	Reasonable	3	0	0	3
Schools	Schools Financial Value Standard - School 1	1	Completed	Partial	13	0	5	8
Schools	Schools Financial Value Standard - School 2	1	Completed	Reasonable	5	0	1	4
Schools	Schools Financial Value Standard - School 3	1	Completed	Partial	8	0	2	6
Schools	Schools Financial Value Standard - School 4	1	Completed	Reasonable	7	0	0	7
Operational	Safer recruitment - Children's Wellbeing - Staff and Agency Staff	1	Completed	Reasonable	6	0	0	6
ICT	Patch Management	1	Completed	Reasonable	4	0	0	4
ICT	IT Access Controls –Mosaic and other systems used by AWB and CWB	1	Completed	Partial	6	0	2	4
Follow Up	Deprivation of Liberties	1	Completed	Follow Up	-	-	-	-

SWAP INTERNAL AUDIT SERVICES
Assuring – Improving – Protecting

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 19

Unrestricted

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	1 = Major ↔ 3 = Medium Recommendation		
						1	2	3
Key Control	Council Tax	2	Completed	Reasonable	2	0	0	2
Key Control	Housing Benefit and Council Tax Reduction	2	Completed	Reasonable	2	0	0	2
Governance, Fraud & Corruption	NMITE Project (University) End of July 18 assurance	2	Completed	Advisory	_	_	_	_
Governance, Fraud & Corruption	Corporate Peer Challenge	2	Completed	Reasonable	2	0	0	2
Governance, Fraud & Corruption	Internal Control Improvement Board	2	Completed	Follow up	-	-	-	-
Grant Certification	Local Transport Block Funding – Grant Certification	2	Completed	Reasonable	1	0	0	1
Governance, Fraud & Corruption	Effectiveness of programme Boards for major system changes/projects	2	Discussion Document					
Operational	Health and Safety	2	Completed	Partial	6	0	2	4
Operational	Compliance with contract and financial procedure rules – revenue	2	Completed	Reasonable	9	0	2	7
Operational	Hoople	2	Completed	Reasonable	5	0	1	4
Operational	Integrated Short Term Support and Care Pathway – Delayed Transfer of Care plan – Front Door Customer Service – Redirected.	2	Completed	Reasonable	5	0	0	5
Operational	Client finance System - Interface between all systems –	2	Deferred to 2019-20	-	-	-	-	-
Operational	Use of regional framework for foster care (External Residential and Fostering Placements	2	Completed	Partial	7	0	1	6
ICT	Third Party Agreements (including Cloud)	2	Completed	Partial	6	0	2	4
Key Control	Accounts Payable	3	Completed	Reasonable	2	0	0	2
Key Control	Main Accounting	3	Completed	Substantial	1	0	0	1

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	Recommendation 1 = Major ↔ 3 = Medium		
						1	2	3
Key Control	Payroll	3	Completed	Reasonable	4	0	0	4
Key Control	Accounts Receivable	3	Completed	Reasonable	2	0	0	2
Key Control	Capital Accounting	3	Completed	Reasonable	2	0	0	2
Key Control	NNDR	3	Completed	Reasonable	5	0	0	5
Governance, Fraud & Corruption	NMITE Project (University) End of October 18 assurance	3	Completed	Advisory	-	-	-	-
Governance, Fraud & Corruption	Declaration of personal and business interests	3	Removed	-	-	-	-	-
Grant Certification	Redundant Building Grant Funding	3	Request to move to the end of July 2019	-	-	-	-	-
Operational	Local population forecast using for future planning such as house building requirement	3	Removed	-	-	-	-	-
Grant Certification	Troubled Families – Monthly assurance on claims to end of March 2019	3	Completed	Substantial	0	0	0	0
Operational	Integrated Short Term Support and Care Pathway - County Teams	3	Completed	Advisory	6	0	1	5
Governance, Fraud & Corruption	Children's centres	3	Deferred to 2019-20	-	-	-	-	-
Governance, Fraud & Corruption	Section 20 Children Accommodated by the Local Authority	4	Completed	Reasonable	2	0	1	1
Operational	Brokers Service - formally Care Workforce Project – support to Domiciliary Care Agencies recruitment	4	Discussion Document					
Operational	Contract Monitoring	4	Draft Report					
Governance, Fraud & Corruption	NMITE Project (University) End of January 19 assurance	4	Completed	Advisory	-	-	-	-
Governance, Fraud & Corruption	EU General Data Protection Regulation	4	Completed	Partial	7	0	2	5

Audit Type	Audit Area		Quarter	Status	Opinion	No of Rec	1 = Major ↔ 3 = Medium Recommendation		
							1	2	3
Operational	Procurement Cards		4	Completed	Substantial	3	0	0	3
Operational	Mandatory Training		4	Deferred to 2019-20	-	-	-	-	-
Governance, Fraud & Corruption	Treasury Management Counterparty		3	Completed	Advisory	-	-	-	-
Governance, Fraud & Corruption	Blue Badges		4	Completed	Reasonable	5	0	0	5
Operational	Development Regeneration Partnership		4	Completed	Reasonable	5	0	0	5
Operational	Adult Well Being (AWB) Contract Monitoring – Quality Assurance Framework		4	Draft Report					
Governance, Fraud & Corruption	Quality Assurance Framework combined with AWB Contract Management		4	Replaced	-	-	-	-	-
Operational	Homepoint - Review of new provider		4	Deferred to 2019-20	-	-	-	-	-
Governance, Fraud & Corruption	Internal Control Improvement Board		4	Completed	Reasonable	-	-	-	-
Schools	Prevention of Fraud (Schools)	School 1	4	Completed	Reasonable	1	0	0	1
		School 2			Reasonable	4	0	0	4
		School 3			Partial	6	0	2	4
		School 4			Reasonable	7	0	0	7
Follow Up	Serious and Organised Crime Audit checklist		4	Completed	Follow Up	-	-	-	-
Follow Up	Data Sharing Protocols with partners and third parties		4	Completed	Follow Up	-	-	-	-
Follow Up	Market Intelligence		4	Completed	Follow Up	-	-	-	-
Follow up	Emergency Planning - Public Health		4	Completed	Follow Up	-	-	-	-
Operational	Honorarium, Market Forces and Standby and on call payments		4	Completed	Reasonable	3	0	0	3
Follow Up	Annual Care Assessment -Social Care Workforce Performance		4	Completed	Follow Up	-	-	-	-

Audit Type	Audit Area	Quarter	Status	Opinion	No of Rec	Recommendation 1 = Major ⟷ 3 = Medium		
						1	2	3
Follow Up	Short Breaks - Children's Wellbeing	4	Completed	Follow Up	-	-	-	-
Follow Up	Public Health Contracts	4	In Progress	Follow Up	-	-	-	-
Follow Up	Data Quality - Decision Making Reports and Corporate Budget Performance Reports	4	Completed	Follow Up	-	-	-	-
Follow Up	Continuing Health Care Funding	4	Completed	Follow Up	-	-	-	-

S W A P INTERNAL AUDIT SERVICES
Assuring – Improving – Protecting

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Page 23

Unrestricted